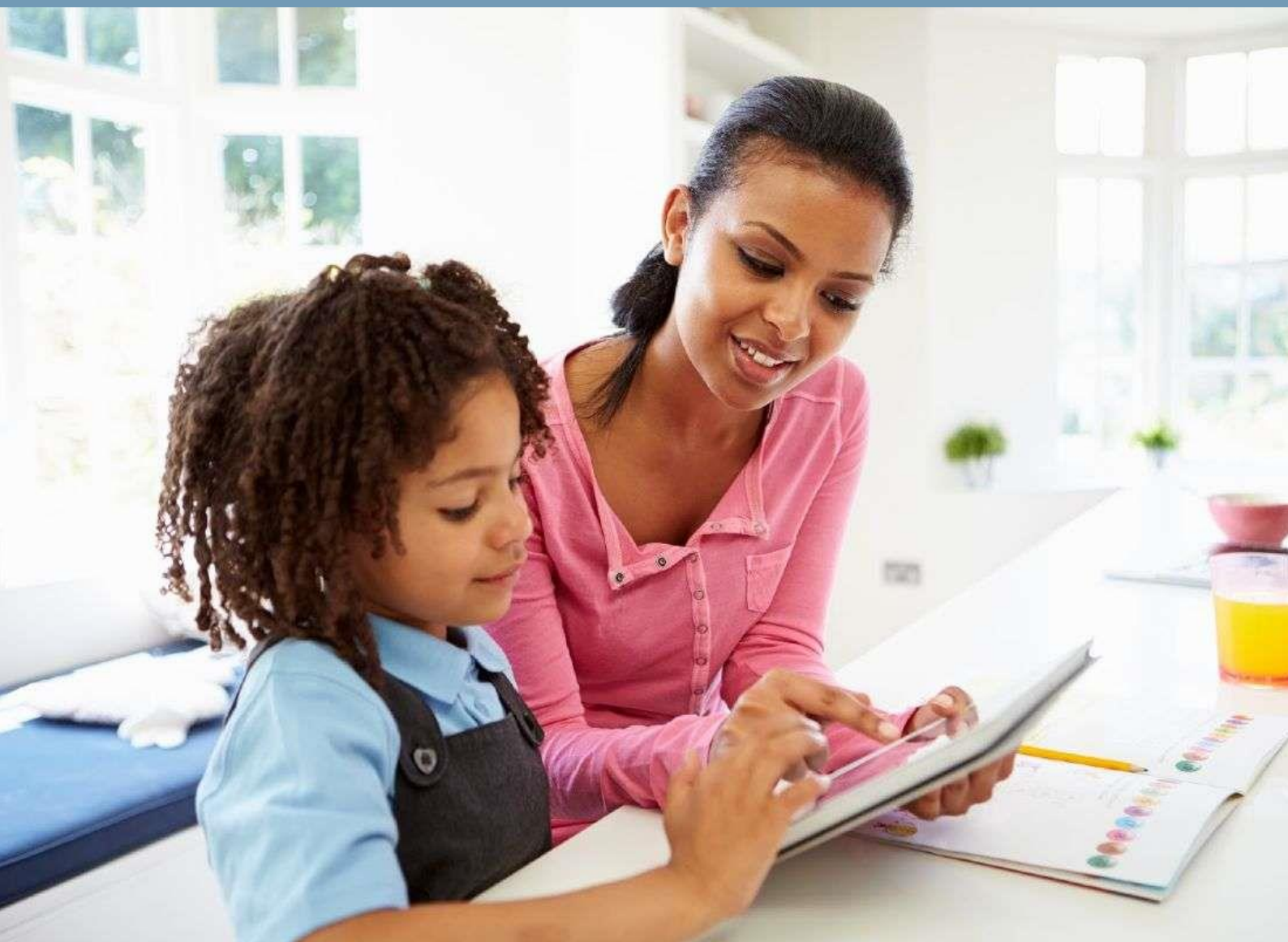


The Impact of COVID-19 on Lewisham Residents

A report by Healthwatch Lewisham



September 2020

“Life has become smaller; it feels like other people are a danger suddenly.

Kids have missed their friends and missed out on schooling.

Loss of income during furlough and a rapid move to working from home - which was stressful.”

Local resident

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1. Acknowledgments

Healthwatch Lewisham would like to thank the 1,030 residents who took the time to complete our COVID-19 survey. Your experiences will help local services to understand the issues of patients and inform their COVID recovery plans.

We would also like to acknowledge Charlotte Bradford, Sophie Kirby, Darren Morgan, Mathew Shaw and Marzena Zoladz for all their effort supporting the project.

Healthwatch Lewisham would like to thank our partners, South East London Clinical Commissioning Group for the co-production of the survey and to Baring Road Medical Centre and Sydenham Green Group Practice for sharing the questionnaire amongst their patients.

2. Background

Healthwatch Lewisham is one of 152 local Healthwatch organisations that were established throughout England in 2013, under the provisions of the Health and Social Care Act 2012. The dual role of local Healthwatch is to champion the rights of users of health and social care services and to hold the system to account for how well it engages with the public.

Our remit as an independent health and social care champion is to be the voice of local people and ensure that health and social care services are safe, effective and designed to meet the needs of patients, social care users and carers. We give children, young people and adults in Lewisham a stronger voice to influence and challenge how health and social care services are purchased, provided and reviewed within the borough.

We continue to deliver our core function of gathering public and patient feedback across health and care services impacting Lewisham patients. In June 2020, we developed an online questionnaire to understand the experiences of Lewisham residents during the COVID-19 pandemic and lockdown which was imposed by the UK Government in March.

The purpose of the project was to identify the different issues affecting Lewisham residents to inform health and care organisations and ensuring that the ongoing response to the pandemic and subsequent reviews take into account the needs and experiences of local people.

3. Methodology

An online survey was developed with our colleagues from the Lewisham Primary Care Commissioning Team and focused on the issues of access to services, access to information and the impact on people's mental health.

We collected views through the digital engagement from 10th June to the 17th July which was open to all residents who live in the London Borough of Lewisham. To hear the voices of those who are digitally excluded, we gave the opportunity for people to share their experiences over the phone, allowing us to fill out the survey on their behalf.

The survey consisted of 34 questions which were a mixture of quantitative and qualitative, respondents were able to give more detail about their experiences through free text comments.

We promoted the questionnaire through our website, social media and via a network of local contacts across the health and care and voluntary sector. GP practices also shared the survey with their patient lists by text.

All feedback was anonymous.

4. Limitations

Although residents were given the opportunity to speak to us over the phone to complete the survey, it should be recognised that this method only accounted for approximately 5% of respondents. The survey does not therefore adequately reflect the needs and views of those who are digitally excluded - an important issue that needs to be addressed as services recover and are redesigned.

5. Executive Summary

This report is based on the feedback of 1,030 people, who completed the survey during June and July 2020.

This is a summary of key themes and issues (see sections 6 - 12 for findings in full).

Key Findings: Themes

Infection Risk and Social Distancing

- 30% of respondents felt at high risk from the virus, those with long-term conditions were most likely to consider themselves high risk
- 15% of respondents had received a letter or text advising them to shield
- 67% of respondents are worried about spreading the virus in the community
- There are widespread concerns about the lack of social distancing within the local community; residents are wanting information on how they should respond if they witness a breach of the guidance, as well as reassurance that safety protocols will be followed

Access to Services

General

- There remains a considerable reluctance by residents to not access services because of the fear of catching COVID-19 or by being a burden on the NHS. Our data shows that public opinion in July did not differ from comments shared in the previous month
- Patients felt that up to date coronavirus figures, the availability of a vaccine, clear information from services about infection control measures and provision of PPE for staff would encourage them to access services
- Respondents strongly feel there is a continued need for face to face appointments and for a wide range of available appointments rather than a “one size fits all model.”

Pharmacy services

- The majority of people experienced ‘organised and professionally managed’ pharmacy services, with most able to obtain prescriptions and medication without incident.

GP services

- 20% of respondents were unaware that their GP practice was open for routine appointments
- Certain GP practices have disabled their online booking systems which have resulted in congested telephone lines
- In some cases, it is now easier to secure GP appointments than before the pandemic - with many accounts of 'fast and efficient' services received. The ability to send images for diagnosis has also worked well for many patients. However, we have also received evidence of patients experiencing long delays in phone queues until a receptionist was able to answer their call.
- While there is appreciation of telephone consultations, some people question their effectiveness for supporting issues that require physical examination
- Although a small sample size, patients with sensory impairments struggled to access GP services

Hospital services

- Patients have benefitted from quieter hospital services, and subsequently shorter waiting times, for the services that were available.
- Reports of cancelled appointments are common, with some patients receiving limited notification. For those with acute conditions or disabilities, delays in treatment can be particularly uncomfortable.

Mental Health and Wellbeing

- The COVID-19 outbreak and lockdown has had a substantial emotional impact on residents, with people experiencing issues such as bereavement, financial worries, social isolation and anxiety. There are likely to be further emotional impacts from post-lockdown redundancies which may not have been apparent at the time of the survey
- There is a significant contrast in experiences, with some residents feeling more relaxed as the shock of the lockdown lessens, while for others their lives have completely changed
- Friends, family and neighbours have been the largest single form of support during the COVID-19 pandemic
- Parents and carers are finding additional responsibilities such as home schooling to be difficult to balance with their work lives/other tasks

Information and guidance

- Respondents felt the best sources for information to keep themselves safe during the pandemic were the daily COVID-19 briefings, news and the NHS and Government websites. National information sources were preferred to local communication.
- The 4 main topics which respondents wanted to receive further information and guidance around were COVID-19 testing, mental health self-help tips, dental services, and any changes to local healthcare services they access.

- Clear information about what services are offered by the different local healthcare providers would encourage attendance.

Digital Technology

- 92% of respondents felt comfortable using digital technology, which is an expected outcome when factoring in the nature of the survey.
- The main limitation of increased access to services using a tablet, computer or smartphone is the digital exclusion for those who cannot use or afford to use the technology. But people were also concerned about issues such as missing GP call-backs or whether receptionists and other staff were sufficiently trained to recognise urgent issues in the triage system
- Training and guidance would increase confidence in some people using digital technology to access healthcare.

BAME Experiences

- Just under a quarter (24%) of respondents identified as Black, African, or Minority Ethnic or from a non-white background
- 35% of respondents considered themselves to be at high risk from the virus
- BAME respondents are less likely to have a stated mental health condition but are also less likely to be able to access support and resources for mental health needs.
- BAME respondents are more worried about their job or financial security because of the pandemic
- BAME respondents found it harder to find information and guidance in accessible formats. This finding primarily relates to residents' who do not speak English as their first language.

Analysis of Feedback

This report is based on the feedback of 1,030 people, who completed the Healthwatch Lewisham COVID-19 survey during June and July 2020.

Our analysis (sections 6 - 12) presents findings around physical health and access to services; mental health and wellbeing; personal and family relationships; Black and Minority Ethnic (BAME) communities, environment and finances; communication and digital technology.

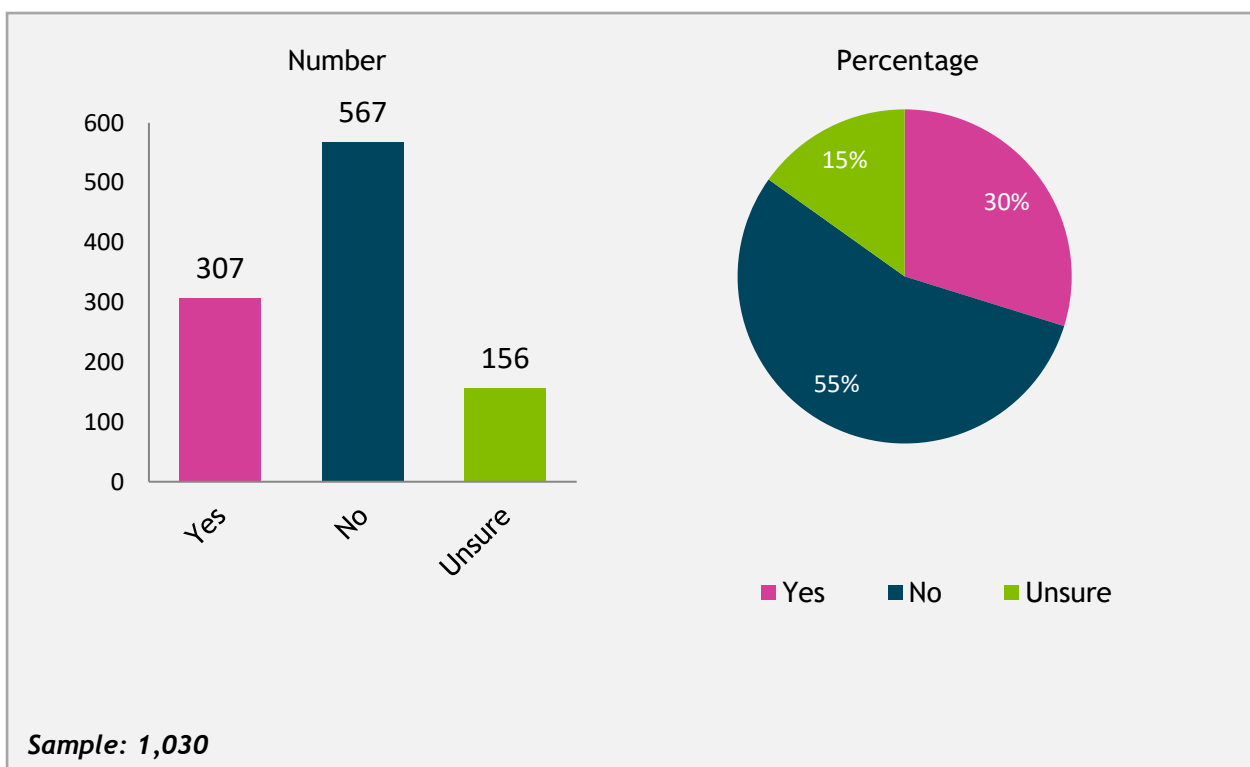
We analyse feedback as a whole, and look closely at age, gender, ethnic background and existing conditions, to establish any findings that may be especially relevant to certain groups.

6. Physical Health and Service Access

In this section, we identify those who consider themselves to be at high risk from Covid-19, explore infection concerns, and analyse feedback on health and care services.

To understand people's concerns about coronavirus, we asked them whether they considered themselves to be at 'high risk'.

6.1 Do you consider yourself to be at high risk from Covid-19/Coronavirus?



6.1.1 Please tell us why you consider yourself to be at high risk?

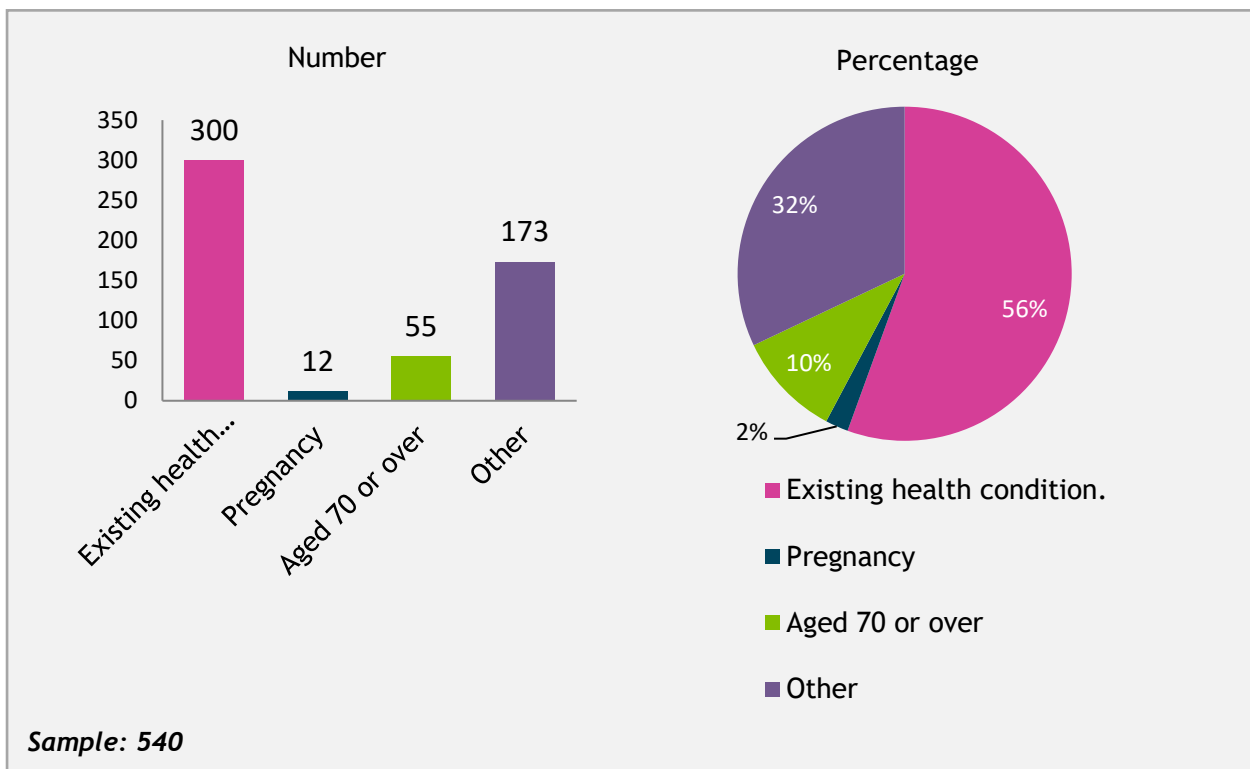


Figure 6.1 shows that 30% of respondents felt they were at high risk if they contracted the virus. Of those identifying as high risk, 56% cite an existing health condition as the reason why they felt vulnerable. Stated long-term conditions include diabetes, hypertension, COPD and asthma. Residents with physical disabilities, mental illness or a cancer diagnosis were also concerned about the consequences if they were to catch the virus. 10% of respondents indicate that they considered themselves to be at high risk due to being aged 70 or over.

32% of respondents give 'other' reasons for why they classify themselves as high risk. For example, a significant number of people from BAME backgrounds consider their ethnicity to be a high-risk factor, largely due to the information being reported by the national media and statistics. Key workers based in exposed environments, such as schools, hospitals or supermarkets also felt vulnerable.

Many respondents also cite poor physical conditions, such as obesity and weakened immunity (often because of surgery).

6.1.2 Impact Scale

When looking closer at specific groups, we find that several exceed the baseline of 30%. Those with stated long-term conditions are the most at risk, with over half (54%) in the high-risk category.

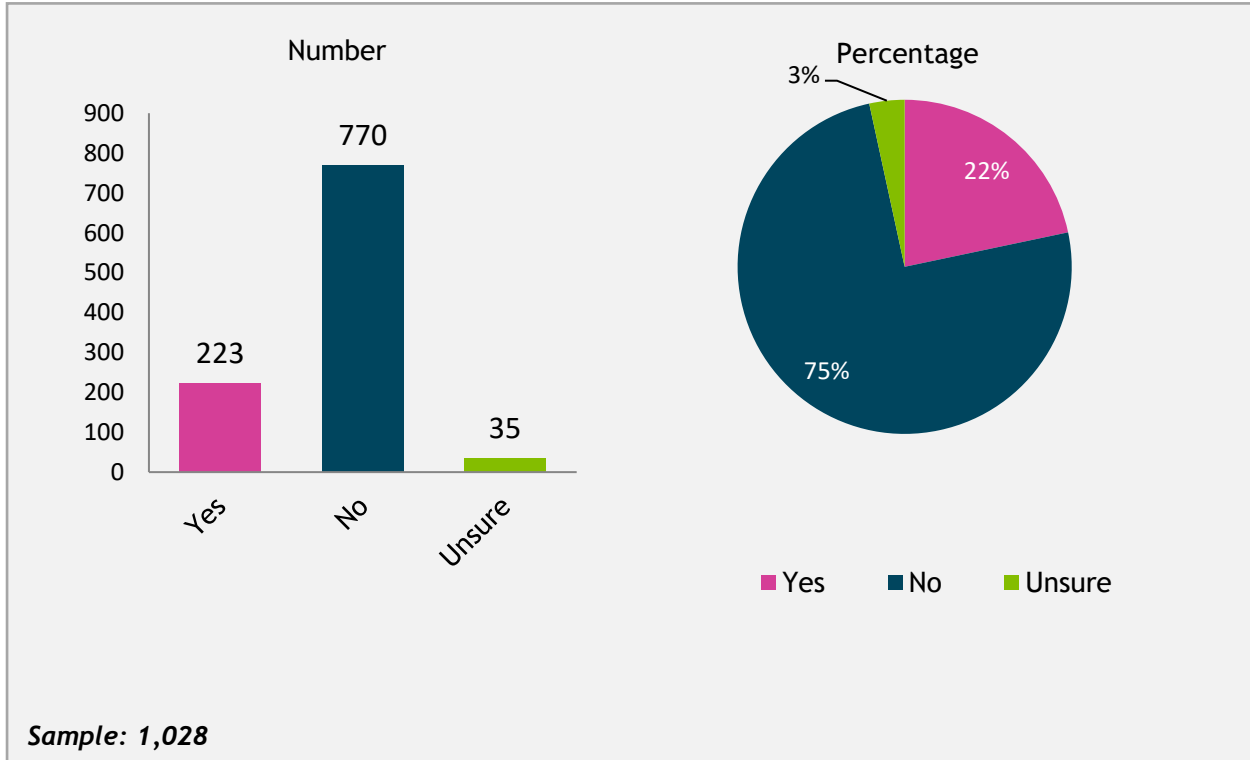
At 'high risk' from Covid-19/Coronavirus:

All respondents (baseline)	30%
Aged 50-64	34%
BAME respondents	35%
Men	36%
Disabilities	37%
Carers of people at high risk	43%
Aged 65+	50%
Long term conditions	54%

6.2 Caring for, or supporting those at High Risk

We asked people if they care for, or support anyone considered to be at high risk. Just over a fifth of respondents (22%) indicate that they do.

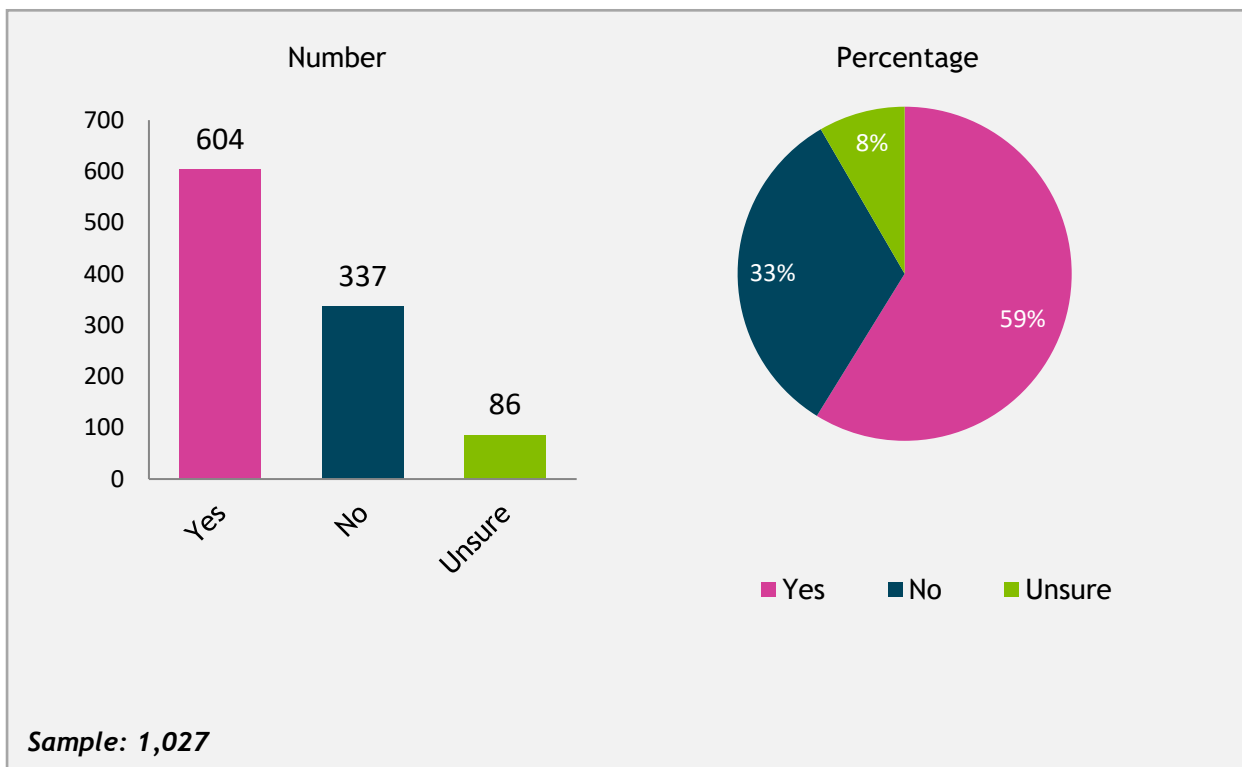
6.2.1 Do you care for or support someone, or more than one person, who is considered to be at high risk?



6.3 Infection Spread - Concerns

It is notable that only third of people (33%) are ‘not worried’ about spreading the virus to others.

6.3.1 Are you worried about unknowingly spreading the Coronavirus to other people?



Despite the number of cases reducing locally, a significant number of people in Lewisham remain fearful of contracting the virus, with much anxiety about leaving the house or using public transport. Those with serious concerns about public transport may be limited in their movement which could impact on accessing services.

Selected Comments

“Having to worry each time I go outside to the shop. I wash absolutely everything when I get home.”

“I worry about visiting the bank to get my pension, no desire to go outside.”

“My eldest child is fearful of leaving the house.”

“I was told off by one customer for touching sandwiches at the supermarket.”

“I feel unsafe going on public transport, so this limits me to my immediate area.”

6.3.2 Social Distancing

There are widespread concerns about the lack of social distancing within the local community, which some believe is down to the easing of restrictions instilling a sense of normality. Residents want information on how they should respond if they witness a breach of the guidance, as well as reassurance from health services that safety protocols will be followed.

Selected Comments

“Some people don’t wear masks, stand close to others, go on like normal. They don’t wash hands or use hand sanitizer!”

“Now lockdown has lifted everyone has gone back to normal, and forgotten about crucial things like social distancing,”

“Really worried about exercise - went out at 5am a few times but uncovered runners bumping into me scared me. I ceased going out.”

“At work I worry I’m not in control if other people do not stick to social distancing and hygiene measures. Some customers argue the point of keeping safe because they don’t believe the pandemic is serious.”

6.4 Risks Associated with Health Services

It is a known fact that people, for a range of reasons, have avoided accessing health services during the pandemic. In one survey question, we posed a series of statements, based on well-known scenarios to understand which were most relatable.

6.4.1 Do any of the following statement(s) affect the way you seek health care during the Coronavirus outbreak? Please select all that apply

Top 5 statements	
I do not want to use public transport as I am worried about catching coronavirus	53.50%
I do not want to be a burden on the NHS	39.42%
I do not want to visit my GP Practice or hospital as I am worried about catching coronavirus	38.83%
None of the above	22.30%
I did not know that my GP Practice is open for routine appointments	20.29%

The chart shows that there remains a considerable reluctance by residents to not access services because of the fear of catching COVID19 or by being a burden on the NHS. Our data shows that responses in July did not differ from comments shared in the previous month. It should be noted that several respondents avoided

services despite potentially needing emergency treatment or important consultations because they did not want to risk becoming infected. Services will need to outline the steps they have taken to ensure a safe environment to provide reassurance to concerned patients.

Interestingly, 20% of respondents were unaware that their GP practice was open for routine appointments, with many thinking primary care services were closed or not accessible. Practices need to regularly communicate with their population about what services are currently available for patients and any future changes. The communication will need to be shared through a variety of channels such as website, text, letter to ensure equity of access.

We also hear from social care staff, including a care home manager, who outlines anxieties about working with colleagues who use public transport.

20% of respondents did not feel that any of the statements applied to them and that they were comfortable in accessing services without concerns of contracting coronavirus.

Selected Comments

"I have found a lump in my left breast, but I don't want to go near the GP surgery because of the fear someone/others may have Covid-19."

"Broke my finger at the height of lockdown and resorted to first aid as I was petrified of going to GP/hospital, despite being young, fit and healthy."

"I will be visiting hospital next week for a bronchoscopy and am confident they are taking additional precautions. However, I do not want to visit my GP practice because a friend who is also at high risk contracted Coronavirus after having visited this surgery."

"I don't mind going to the doctors but not hospital."

"I manage a residential home. I am working with staff using transport to travel to work who are from the BAME communities and have health problems. The work environment increases my risk."

"I find the idea of wearing a mask very unpleasant."

6.5 Service Access - Reassurance and Support

We asked people what would reassure or support them, to access local health services (where needed) both during and after the lockdown. When reviewing suggestions, we recognised themes around appointment accessibility, infection control, testing and communication.

Appointment Accessibility

Residents are more likely to access services if it became easier to book appointments within a convenient timescale. This is a finding which has been heard by Healthwatch Lewisham repeatedly over the last few years. There also needs to be a broad range of appointment types available including face to face, telephone and online consultations - with the ability to book either online or by the telephone. Digital consultations were appreciated and valued as an effective safety measure.

Infection Control and Testing

Respondents stated that the availability of a vaccine and anti-body testing for everyone would make them feel comfortable and more likely to not just access healthcare, but also to engage in the community. Similarly, residents would value being given up-to-date local coronavirus figures which would allow them to have a better understanding of the prevalence of the disease in Lewisham.

Testing is important for many, appointments need to be readily available, as well as the implementation of an effective “track and trace” system which monitors local outbreaks.

People also need reassurance that services, staff and patients are infection free and central to this is written confirmation of policies and procedures. Many give suggestions on precautions - such as regular and visible cleaning, provision of hand sanitizers, compulsory use of face masks, good social distancing, limits on patient numbers and clear separation of those infected and virus free. In addition to the reassurance that services have infection protocols in place, it must be evident that patients are adhering to the regulations.

Communication

Respondents felt that official coronavirus information and guidance must be clear, simple and consistent. There is an overwhelming amount of information available both nationally and locally, which is why people value straightforward messaging. Many say that services, such as GPs should get in touch with patients to update them - with email or text the preferred methods.

Residents would be more willing to access healthcare if services clearly outlined their current service offer during the pandemic. Many would also like more information about the services which are currently available.

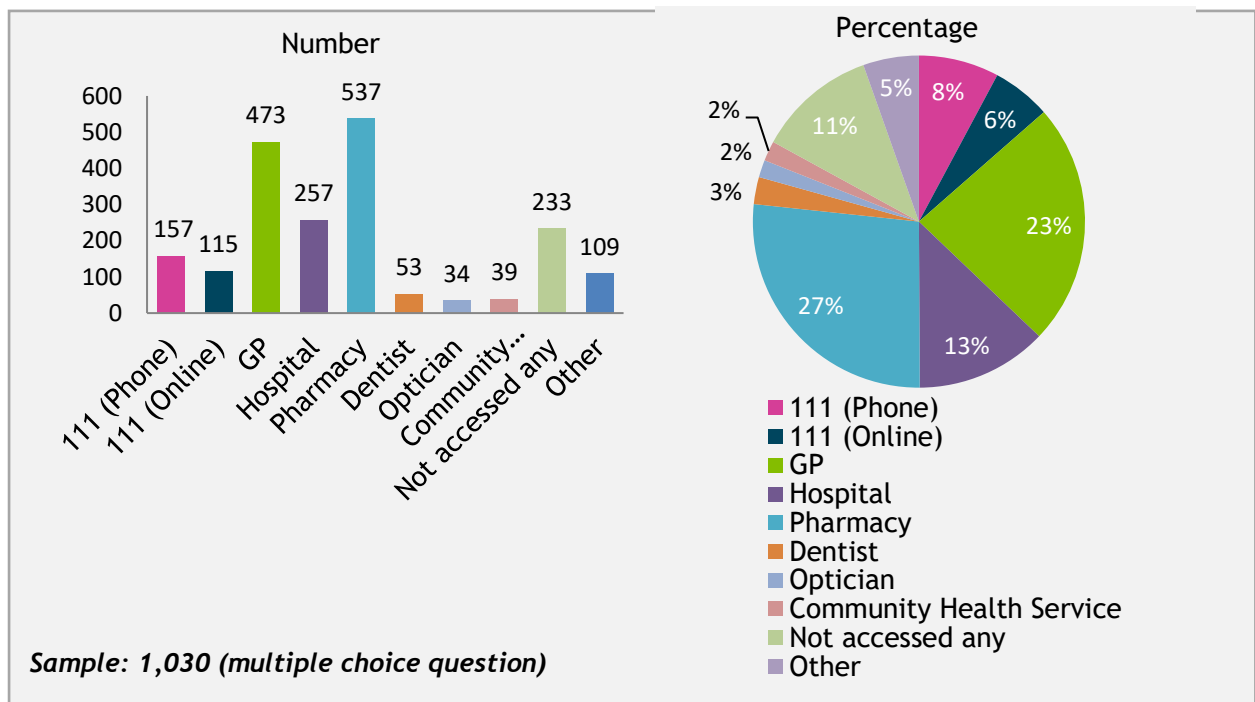
6.6 Experience of Services

As well as understanding people’s feelings about coronavirus, we wanted to know their experiences of using health and care services during the lockdown. The majority of respondents had accessed at least one service since March.

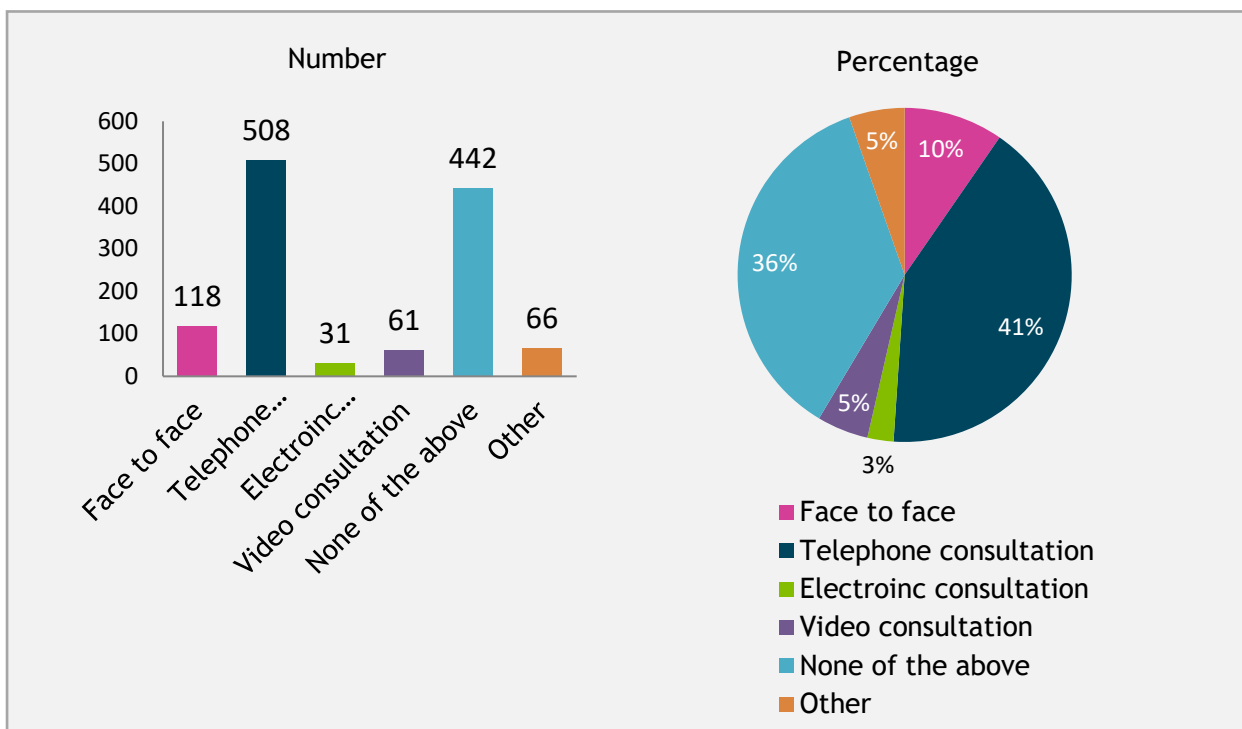
The chart below shows that pharmacy (27%) and GP services (23%) were the most accessed services by respondents. In relation to NHS 111, the phone service was used more often than the online alternative.

Telephone consultations were the primary method for residents to engage with health professionals. As a result of the lockdown, few consultations are reported to be in-person, with them only accounting for 10% of selections.

6.6.1 Have you or the person you care for accessed any of the following health services during the lockdown?



6.6.2 Have you had a consultation with your GP, practice nurse or other health care professional during the Coronavirus outbreak? If so, by what method?



Respondents were given the opportunity to fill out a comment box to provide more details about their individual experiences. We have broken down the feedback by service.

6.6.3 NHS 111

During the lockdown, NHS 111 was set up as the first point of contact for anyone wanting advice and information around coronavirus. Residents have had a varied experience of the national service. We hear that people were mostly reassured by the information and support provided by NHS 111, and that staff have been caring and understanding, on the whole.

However, in some cases we hear that the clarity and detail of information received has been lacking - with some people attributing this to pressures and time constraints on the service. Congested telephone lines, and a lack of response following submission of online forms is also reported.

Selected Comments

Positives

"The 111 phone line has been very helpful for knowing whether I need a doctor or A&E."

"I checked my symptoms with NHS 111 and subsequently had a telephone appointment with my GP. This reassured me."

"111 informative and reassuring - absolutely explained everything in a cognitive, understanding and caring manner."

"111 were very helpful and gave me excellent advice."

Negatives

"111 telephone service was obviously very busy, and I was placed on hold for an hour."

"All good, although 111 was understandably overwhelmed and lacked detail in their response."

"111 have not been helpful and I feel like I was not listened to and just brushed off."

"I contacted NHS online early on in the lockdown as I had a persistent cough. I filled in the symptoms form and that was it. No further follow up."

6.6.4 GPs

Feedback about GP services compromised of marginally more positive than negative experiences. A significant number of people felt it is now easier to secure appointments than before the pandemic - with many accounts of 'fast and efficient' services received.

Many patients comment on good levels of support, such as GPs phoning to check on welfare, follow-up on treatment plans or make referrals. The ability to send images for diagnosis has worked well for patients. Over the last few years, residents have been grateful for the quality of treatment and care they received from doctors and practice nurses. The COVID-19 survey responses show that this sentiment has not changed during the lockdown.

For some residents, telephone consultations were ideal because they no longer had to travel to and from the service. On the other hand, several residents were concerned about the lack of privacy, if they had to take a call when they were not at home.

Those who attended face to face consultations found the health professionals to be helpful. The comments indicate that respondents strongly feel there is a continued need for face to face appointments.

In relation to access, some practices have disabled online booking systems to enable a telephone triage model, which has created longer waiting times. A few people who have recently moved into the borough have been unsuccessful in registering for primary care due to issues with online registration.

While there is appreciation of telephone consultations, some people question their effectiveness for supporting issues that require physical examination, especially long-term conditions such as asthma and diabetes. Patients throughout the survey reiterated how much they valued face to face appointments.

Although a small sample size, it should be noted that two patients with sensory/visual impairments struggled to access GP services. A blind resident told us that he did not feel any of the digital apps were accessible. A respondent with hearing loss explained that his GP appointment was cancelled because of a communication issues around the availability of a BSL interpreter.

Selected Comments

Positives

"I am happy to have telephone consultations."

"The appointment by phone was super-fast and efficient - unlike normal times."

"The GP called me back almost immediately and arranged a prescription for the same day."

"It's been really amazing. We've been able to send pictures to doctors and received treatment plans very quickly. Thank you so much."

"My GP's have contacted me to ask if I'm okay. They are brilliant."

"Although not easy to get through on the phone, the service I received from my GP was excellent. After an initial phone appointment, he called me several times as follow up & booked relevant hospital appointments. Everything has gone as smoothly as could be expected."

"I had a good experience across all services, actually better than usual except I didn't actually see my doctor, but she did refer me to the hospital for a scan which I received within 2 weeks."

"The GP was very helpful. He listened to my symptoms and was obviously looking at my notes. He sorted my health issues, but then added I was due for a blood test and sorted out the paperwork so all I had to do was to book an appointment."

Negatives

"I felt that I couldn't really explore my medical problem sufficiently over the phone with my GP."

"My regular appointments have been by telephone meaning symptoms are not monitored and my access to treatment if necessary is restricted. I felt they were pointless."

"As a deaf person telephone only access is a barrier to me."

"I have had a nightmare experience trying to get my repeat prescriptions as I was told by my GP practice to do this online but not one app or website is fully accessible to blind users."

"Over the phone consultations were hard to get around my work. Had to take a private phone call on the bus on my way to work."

"Need to call numerous times as always engaged but no option to visit, email or book phone consult. Previously you could book face to face consults online."

"The GP practice is not open for routine appointments. Our family have struggled to get access to healthcare during this period and we are articulate and capable of negotiating organisational barriers."

"I moved recently from a different borough and cannot register online at my new local GP."

6.6.5 Dentists

For some people, telephone appointments have been effective for advice and prescribing. Others, some in acute pain and discomfort, have not been able to secure much needed treatment. Patients were unclear about how dentists were operating during the lockdown as there appeared to be a specific criterion for what was classified as an emergency appointment. For example, a couple of residents needed to replace fillings which had either broken or fallen out but were unable to receive treatment.

Selected Comments

Positives

"Dentist appointment was via phone and solved the problem in the interim, until I can visit."

"My middle son had a suspected abscess, so I phoned our dentist who gave us advice and prescribed antibiotics which we picked up from the pharmacist. Very quick, very happy."

Negatives

“I have suffered toothache throughout the outbreak and although my NHS dentist has offered advice and I've now had an x-ray, they are still unable to give me the treatment I need as will involve drilling. The debilitating impact of tooth pain has been greatly underestimated or ignored by health chiefs.”

6.6.6 Hospital Services

The majority of patients who accessed hospital services described them as being extremely quiet and benefitted from shorter waiting times as a result.

We received mixed experiences about hospital staff's observance of hygiene and infection control. Some feel that the service is safe and well organised, while others have noticed staff without masks, a lack of protective screens and barriers, and patients not using hand sanitizer. Although respondents appreciated the steps hospitals had taken to limit the spreading of the disease, there were concerns about the severity of visiting restrictions imposed which means limited contact for carers and family members.

Expectant mothers may be especially wary of contracting the virus - on the way to, or at hospital. In one experience we hear that an antenatal patient preferred to walk 11 stories, rather than use a lift.

We received limited feedback about maternity services but there were several experiences concerned about minimal communication from midwives and health visitors. Similarly, a few women were worried about the lack of routine baby growth and developmental checks.

Many respondents had appointments cancelled to enable hospitals to have capacity to respond to the pandemic. Most people were informed about cancellations weeks in advance of their scheduled appointments; however, some patients were only notified after arriving at the hospital. One person experiencing multiple cancellations, and in-need of advice on symptoms was advised to 'look on the internet' by a consultant.

Patients recognise and understand appointments cancellations but are wary of the waiting times once planned services are restarted. For those with acute conditions or disabilities, delays in treatment can be particularly uncomfortable.

Selected Comments

Positives

“My GP referred me to hospital where I was seen quickly because it was so quiet. The doctor, radiographer and therapists were extremely kind, helpful and pleasant. Less than 2 hours from start to finish.”

“I was in Lewisham Hospital A&E. It was very quiet compared to my prior visit and I was seen very quickly.”

“I had an outpatient appointment at Lewisham Cardiology after a GP referral. It all went smoothly.”

“Excellent. Lewisham Hospital seemed very safe.”

“Maternity services felt safe.”

“My partner was shielding and cut his finger a few weeks in. We called 111 and were advised to go to A&E as it wouldn't stop bleeding. At A&E it was very well-organised to separate Covid and non-Covid cases and he was treated very quickly.”

Negatives

“GP consultation was prompt and informative. Visit to main hospital pharmacy in April was not good. Staff walking around without masks, cafe open and no screens, people walking in and out and not using provided sanitizer.”

“All hospital appointments were cancelled and put forward.”

“I am worried that existing health conditions will worsen by the restrictions on regular outpatient appointments.”

“I was told that my appointment had been rescheduled after I got there.”

“Upon arrival the doctor was not there. No communication given to let us know the appointment had been cancelled.”

“Waited from December for the appointment. The March appointment was cancelled twice, then rearranged for June later. The consultant had no information to share with me about the condition (e.g. leaflet). Told me to read the internet.”

“My MS (Multiple Sclerosis) appointment was cancelled, and I was meant to be starting a new drug. The lesions in my head have been causing me anxiety.”

Daughter accessed maternity services - good quality support in hospital but minimal community support for first time mother. Has experienced complications & received some support by phone & one face to face consultation.”

“Gave birth in March (first time mum) and not able to access anyone face to face or even via video link so felt pretty abandoned especially when it came to not being able to breast feed

6.6.7 Paramedics

Despite only receiving a small number of experiences relating to ambulance services. We heard two worrying accounts of paramedics refusing to transport people to hospital, in one case because ‘hospital staff would be angry’. In both incidents, acute kidney failure was diagnosed, and the patients were lucky to avoid serious consequences.

Selected Comments

Negatives

“Had to call 999 as I collapsed at home. I had to beg the ambulance staff to take me to hospital. They said I was fine and that the hospital staff would be angry if they brought me in and that I would not be admitted to hospital. At the hospital I was diagnosed with stage 5 kidney failure and admitted to hospital for a week. The ambulance staff actively tried to stop me going to hospital. If they had succeeded, I would be dead right now.”

“Husband is diabetic - paramedics came on a Sunday and refused to take him even though he was confused. Called 999 again on the Tuesday, husband taken to hospital with Covid, sepsis, diabetic ketoacidosis and acute kidney failure. Angry he was not dealt with correctly on the Sunday.”

6.6.9 Pharmacies

Pharmacies were the most used service by respondents. The majority of people comment on ‘organised and professionally managed’ pharmacy services which allowed them to obtain prescriptions and medication without incident. Respondents also praised the strong communication which meant that repeats prescriptions were processed and collected within a desirable timeframe.

According to feedback, there were mixed experiences when it came to infection control. Some praised services for ensuring that patients adhered to the social distancing guidelines. However, this can also cause long queues which can be uncomfortable for those less able to stand - however most people say that their pharmacy will deliver if required.

Selected Comments

Positives

“Collecting repeat prescriptions was very well managed.”

“I collected prescriptions as a volunteer and for a friend from 2 different pharmacies. At all times found the staff working hard and they were professional and welcoming.”

“Very well organised, socially distanced queue - one person at a time inside.”

“The pharmacy was a safe environment with staff behind a screen and only 3 people allowed in the shop.”

“Had to queue as limited people allowed in at any one time. Staff all in masks. Areas roped off to distance people.”

“Pharmacy delivered as my housemate is shielded which was great!”

“I asked them to bring out my medication, so I did not have to enter the shop. Later they were able to deliver. “

Negatives

“Staff in the pharmacy not wearing masks or gloves. Long queues.”

“Going to pharmacy not so good as have to queue for a long time but I have difficulty standing for periods of time so was badly affected during and after.”

“Easy but inhalers were out of stock for a while.”

6.6.10 Social Care

We asked people if their experience of social care (such as visits from care workers, or to residential/nursing care homes) has been affected by the pandemic.

Many of those not able to visit friends or relatives understand the need for social distancing, however the lack of visits may contribute to poor mental health. In cases where relatives have died, we hear that families have experienced much distress. Furthermore, in some circumstances, the government restrictions have made it harder for residents who are key in organising care for their family because they are unable to visit them due to shielding guidelines.

Some praise was also received, with examples of social workers checking on clients regularly.

Feedback suggests that care workers have been equipped with Personal Protective Equipment (PPE), however in one care home, staff felt the use of face masks can create barriers with residents.

Selected Comments: (Social Care)

Positives

“My carer is always very clean and wears appropriate PPE as do all those that visit me to look after me.”

“We have had many phone calls from social workers offering us help.”

Negatives

"I have been unable to visit my mother in a care home but understand completely why."

"Not being able to visit my mum who subsequently died after 7 weeks was very distressing."

"Mum in care home - not able to see her which impacts on my mental health and hers"

"It has been difficult to supervise my mother's care because I am sheltering."

"My care workers did not turn up sometimes."

"My mother had to cancel Helping Hands carers who came to help shower her. Also, the visiting chiropodist service had to be suspended. She is 91."

"Normally people just leave you on your own with no known contacts."

"I work in social care. PPE is the main change, the barriers between people giving/receiving care are difficult. Also, anxiety among workers and families."

7. Mental Health and Wellbeing

The COVID-19 pandemic and national lockdown has had a substantial emotional impact on residents, with people experiencing issues such as bereavement, financial worries, social isolation and anxiety. When asked about their mental health, people raised a variety of different themes including loneliness, health, family and friends, finances, schooling, leisure and mental health support.

By a notable margin, inability to connect and socialise with family and friends is the prime concern, accounting for 66% of responses (see section 8 for more).

Just over half of respondents (55%) worry about the health of their family and friends, while just under half (47%) are missing leisure or social activities. 35% are concerned about their own health, while 33% worry about their job and financial security. Lesser, but still significant concerns include loneliness and household relationships.

7.1 General Experience

There is a significant contrast in experiences across Lewisham, with some residents starting to feel more relaxed as the "initial shock" of the pandemic recedes. They explained that the adoption of regular routines and activities were beneficial and allowed for personal development. Many people cite the importance of physical exercise to maintain their personal health

For others, lives have been turned ‘upside down’ - those with a sudden lack of routine, employment or with worries about the future are feeling particularly anxious or depressed. In some cases, whole households have been negatively impacted.

Selected Comments

Positives

“It was stressful at the beginning with panic buying and not getting the things I needed for weeks but once things calmed down there has been no stress and I've felt very relaxed.”

“At first, I would occasionally get a bit stressed over nothing, but I think that was mostly adjusting to the new routine. I feel fine now.”

“I really enjoy being off work - relaxing doing my gardening and embroidery so my mental health has possibly improved.”

“I feel this whole episode has made me stronger and more together.”

“My mental health has improved beyond measure since lockdown.”

Negatives

“Personally, it turned my world upside. Any routine I had has withered away and changed. It has exacerbated a lot of mental health issues for the people around me as well.”

“Uncertainty about the future.”

“It is impossible to do anything spontaneously. I just feel sad that so much has been stolen from us.”

“Known people who have died. Parents have been lonely. Kids have been anxious. I've been anxious and sad on days. Extreme loneliness and anxiety all around.”

“Lack of physical exercise has impacted my mental health.”

7.2 Employment

When talking about mental health, a notable number of people refer to their working situations - with the vast majority of feedback negative.

Those with demanding front line jobs, such as doctors and nurses are finding it more difficult, with increased challenges, responsibility and risk. We hear that some people have neglected their personal time and space due to increasing work commitments.

Residents are also concerned about the financial implications that the lockdown will have, especially those that have been made redundant or furloughed. A lack of job security will impact on people’s mental health.

There is likely to be further emotional impacts from post-lockdown redundancies which may not have been apparent at the time of the survey.

Selected Comments

Negatives

“High stress due to working on the frontline - NHS redeployed to intensive care, I also worry about giving Coronavirus to my close family.”

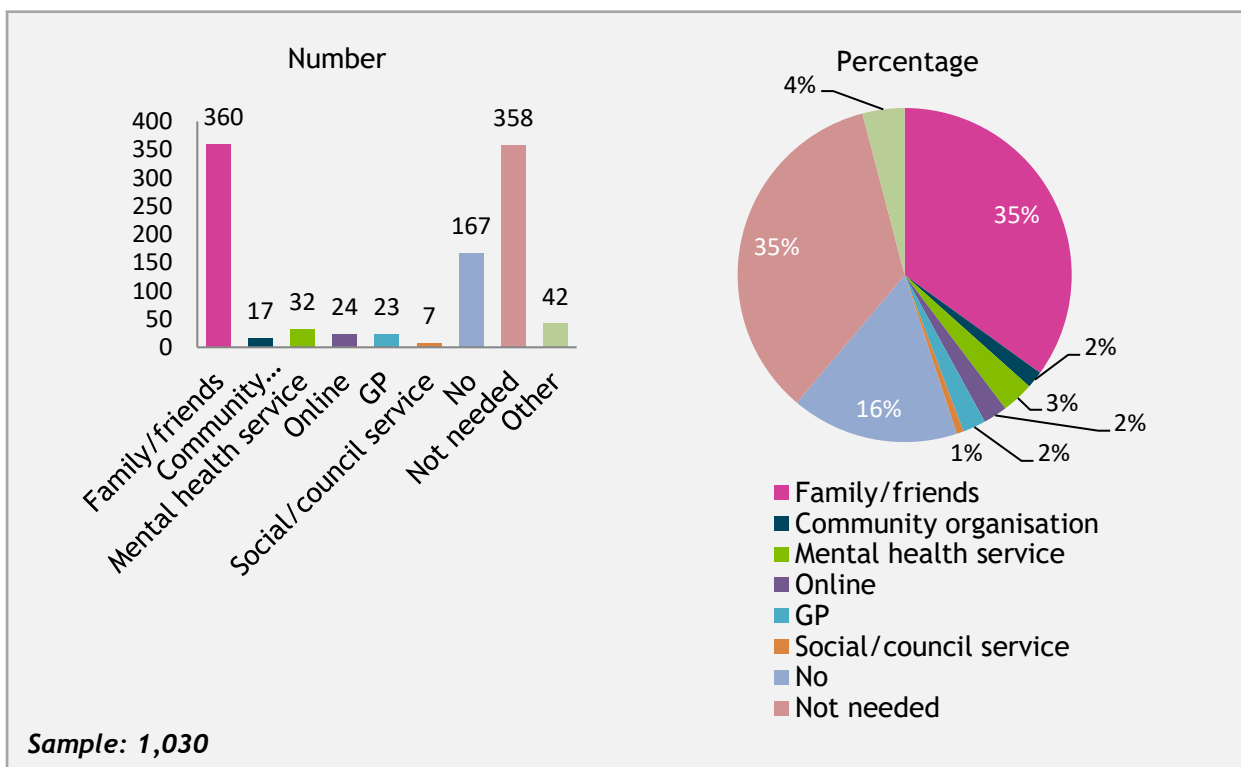
“My job has been more stressful due to the impact of the virus, which has created more stress and led to long hours including bank holidays and weekends when I would not be working .”

“I lost my job as I'm freelance and this has impacted my confidence.”

7.3 Services and Support

We asked people if they have been able to access support for their mental health and wellbeing during the pandemic, and if so, from where.

7.3.1 Have you been able to access support for your mental health or wellbeing during this time, if so from where?



Just under half of respondents (45%) say they have been able to receive some form of support for their mental health, with 22% of them accessing health or community services.

Friends, family and neighbours have been the largest single form of support during the COVID-19 pandemic and further supports why lack of regular face to face contact can have a substantial impact on emotional health.

We received limited feedback on people's specific experiences of using mental health services, with a small percentage of people raising issues around access now that the appointment model has consisted of digital consultations. It should be noted that 16% of respondents were not able to get the support they needed for their mental health.

Local services will need to be aware that the unprecedented mental health impact of COVID-19 will see a rise in the number of residents needing help from mental health services for the first time. It is crucial that services can clearly outline what help is available to residents and where support can be accessed.

Selected Comments

"I'm suffering with mental health issues directly relating to lockdown, but I've been denied help by Psych team."

"All my counselling and wellbeing sessions have been cancelled."

"My mental health has been really bad, but I've not been helped at all by healthcare services. I'm glad that I haven't been suicidal so far."

"My mother in law is completely isolated in her nursing home, and my sister in law has had a mental breakdown, with little support from the totally overworked mental health services."

"Lack of access to medical care for my physical health problems has made me very depressed and anxious during the pandemic."

7.4 Impact Scale

We asked people to rate how the pandemic has affected their mental health and wellbeing.

A sliding scale was used, with 0 indicating 'no impact at all' and 10 a 'very significant impact'. The result (average figure) is around 5, which shows that the pandemic has had a reasonable impact on people's mental health

When looking closer at specific groups, we find that several exceed this baseline. Those with existing mental health conditions are the most impacted (6.8).

How has the pandemic affected your mental health and wellbeing?

Scale: 0 = 'no impact at all' 10 = 'significant impact'

All respondents (baseline)	5.1
BAME respondents	5.1
Carers of people at high risk	5.2
Long term conditions	5.3
Women	5.3
Disabilities	5.6
Aged 25-49	5.6
Mental health condition	6.8

8. Personal and Family Relationships

This section explores relationships, including parents and children, households and wider family and friends.

8.1 Parents and Children

Parents and carers who mentioned are finding additional responsibilities such as home schooling to be difficult to balance with their work lives/other tasks. The lockdown has impacted on the availability of childcare and has meant that some parents are having to look after their children while also working from home - with little support or respite. Parents are also having to reassure their children, particularly those in at-risk groups. Families with vulnerable children, such as those with learning disabilities, say that services have been cancelled.

Parents are also worried about the effect that the closure of schools and playgroups will have on their children's education and social development.

Selected Comments

Negatives

"Stressful trying to juggle work and childcare, and support children with learning while trying to manage home life and prove to work that I am still able to work from home and needed in my role."

"Carer unable to attend so no respite from 24/7 care for son."

“The challenge of parenting and working full-time. Feeling guilty about toddlers screen time and my inability to provide more stimulating activities.”

“My five-year-old son is confused and feeling down.”

“My child lost vital help to help her with behaviour.”

“I worry about the effect on my children - missing school/not seeing their friends.”

“I have a 1 year old and we’ve been unable to go to playgroups, see other mums with babies, or even just go to our local park and put him in the swing.”

8.2 Households

When respondents were asked about the impact of the lockdown, a significant percentage comment on a lack of personal space because travel restrictions have confined people to their homes. Some respondents indicated that this has increased stress and tension within households, with common accounts of ‘short tempers and irritation’. Households with members who are shielding or at high risk can find it especially difficult.

Selected Comments

Positives

“Made me and my husband closer.”

“My mental health is improved as there is far less stress in my life and so much more time, instead, with my partner.”

Negatives

“Easily irritated by being constantly around each other in my own household.”

“Lack of opportunities to go out and socialise has meant increased strain on relationships.”

“It has really varied. I’m with 3 males - 2 teenage boys and my husband. It’s sometimes lonely because I’m the only female and they are sometimes rude, aggressive, and often selfish. It’s not been all bad, but I have felt isolated sometimes. One time, I went to see a female friend and we had a socially isolated chat in her front room (against the rules). I really needed that.”

“My husband is housebound and shielded and I do find the responsibility of looking after him difficult.”

8.3 Wider Family and Friends

Those able to connect with family and friends, or with strong social support networks are finding it easier generally to cope.

For people without social networks it can be exceedingly difficult, with loneliness and isolation commonly reported. A minority in this situation are more resolute - rediscovering old hobbies and interests.

Families, especially grandparents are missing personal interaction, with remote contact cited as being useful but not offering the same closeness.

The lockdown restrictions have caused extreme distress for those who have not been able to visit vulnerable, ill or dying relatives and friends, or attend funerals in person. In addition to the survey, residents highlighted their confusion around funerals processes for COVID and non COVID deaths.

Selected Comments

Positives

“I felt fine during this time I had lots of support from family and friends.”

“Being isolated from family and friends meant feeling lonely and also a time to spend doing the things I had not been able to do for a while.”

Negatives

“Not being able to see my family, grandchildren, missing face to face chats. And being housebound is no fun.”

“Not seeing a newborn grandchild.”

“I am totally isolated, but not considered vulnerable, so I get no help at all.”

“Miss being able to sing in choirs (internet is not the same). Miss being able to visit my church building and see the majority of the congregation who are in vulnerable groups and still shielding.”

“Very distressing to miss family who may not have much time.”

“Burying my mum without a ceremony or religious festival or grieving with my family was really hard.”

9. BAME Communities

Just under a quarter of respondents (243) identify either as from a Black or Minority Ethnic (BAME) community, or from a non-White background.

9.1 Physical Health

When comparing survey results with those who identify as White/White British (W/WB), we find that respondents from BAME communities are notably more likely to be at, or care for somebody at high risk, and to have received a shielding letter.

BAME respondents are also more worried about their own health, but notably were not as worried about the health of family and friends and passing the virus on to others.

9.1.1 Impact Scale

	BAME %	W/WB %
Considered to be at high risk	35%	28%
Received a shielding letter	21%	14%
Care for somebody at high risk	26%	20%
Worried about passing the virus on to others	52%	61%
Worried about own health	42%	34%
Worried about the health of family and friends	49%	57%
Have a stated disability	1%	2%
Have a stated long-term health condition	34%	33%

9.2 Mental Health and Wellbeing

While less BAME respondents have a stated mental health condition, they are also marginally less likely to be able to access support and resources for mental health needs.

9.2.1 Impact Scale

	BAME %	W/WB %
Have a stated mental health condition	6%	9%
Can't access mental health support and resources	9%	8%

9.3 Family, Friends and Relationships

When looking at family, friends and relationships, we find that those from BAME backgrounds feel notably less negative, as a whole, about missing family and friends. We also find that household relationships are slightly more strained.

9.3.1 Impact Scale

	BAME %	W/WB %
Feel lonely	24%	24%
Miss seeing friends and family	51%	72%
Household relationships are tense	16%	15%

9.4 Wider Determinants

We find that BAME respondents have more concerns about their job or financial security and are marginally more worried about missing school or college. Limited access to leisure activities and holidays is slightly less of a priority when compared to “White” respondents.

9.4.1 Impact Scale

	BAME %	W/WB %
Worried about job, or financial security	37%	32%
Worried about missing school or college	5%	3%
Feel sad about not having access to leisure facilities	45%	48%

9.5 Communication and Information

Regarding communication around coronavirus information, those from BAME backgrounds found it ‘harder’ to obtain and understand information and advice about keeping safe from the virus but were able to keep apace of changes in guidance and messaging.

BAME respondents were less likely to find information and guidance in accessible formats. This finding primarily relates to residents’ who do not speak English as their first language.

9.5.1 Impact Scale

	BAME %	W/WB %
Have found it 'easy' to know what to do, to stay safe	61%	65%
How found it 'easy' to keep up to date with information	63%	60%
Have found information in accessible formats	67%	72%

Government statistics reveal that those from BAME communities are more at risk if they contract coronavirus, the lack of information and clarity as to why, is concerning for residents. With their being disparity between the experiences of different ethnicities, it may be necessary to undertake further research, to better understand themes and issues.

Selected Comments

"BAME men are known to be vulnerable especially - what measures are there to protect me and others?"

"As a black British person should I take extra care and how?"

10. Wider Determinants

In this section, we look at wider social determinants which became apparent through the responses to our survey. These including the environment, social activities, finances, employment, food, shopping and community support.

10.1 Living Environment

Many people have noticed cleaner air and a quieter environment since the lockdown was implemented. Those with gardens or easy access to outside spaces recognise themselves to be fortunate.

Respondents from larger households explained that cramped living conditions impacted on their mental health. On the wider community, a few people reported issues with neighbours which had not been resolved.

Selected Comments

Positives

“My mental wellbeing has been improved by having to stop everything I was doing. I worry a lot about the climate crisis, so it was good to see the cars stopped and the aeroplanes stopped and to be able to breathe unpolluted air. I enjoyed seeing people using the parks and spent as much time as possible in my allotment.”

“The calmer environment, reduction in pollution and the less crowded environment has been extremely positive.”

“I couldn't take my children to the park or children's centre. But it wasn't too bad as I have a big back garden and was ok with that.”

“Has limited our social life and holidays. Made us feel lonely at times. But we are generally fortunate in that we have a house and garden for outside.”

Negatives

“The home space is not big enough to accommodate everyone during the lockdown.”

“My neighbour bullies and provokes me constantly, from 4am onwards.”

“Please, Lewisham Council, take the noise complaints more seriously. When spending 24 hours in the same space, a bad noise situation can really make you go crazy.”

10.2 Activities and Stimulation

Many respondents expressed frustration at losing access to their activities and routines, with some citing an impact on their mental wellbeing. With gyms and leisure facilities closed, some people are also worried about the short-term and long-term impact on their physical fitness and mental health.

Selected Comments

Positives

“It's been brilliant. Really loved the down time, got to read, cook, garden with no stress about having to be anywhere by a certain time. It has been a wonderful respite from the world we used to live in, and I have loved it.”

Negatives

“Found life quite tedious at times as one day is much like another.”

“Not being able to access the swimming pool to manage my physical conditions has been incredibly detrimental to my mental health as well as physical health.”

“Missing travelling. Cut short my trip this year.”

10.3 Finances and Employment

As mentioned previously, a sizeable number of respondents have been impacted financially because of being furloughed or being made redundant. We hear accounts of financial hardship, increasing levels of personal and household debt, and those seeking work note that the job market is exceptionally tough.

Selected Comments

Negatives

“I lost my job due to the pandemic.”

“Financially fairly catastrophic. I work in theatre.”

“My income and my partner's income - we are both self-employed, has completely gone and I can't afford to live.”

“We have been left with a lot of debt and uncertainty for our future. We have had to make big changes to our lives as a result.”

“My husband was already redundant, but it has been very hard for him to find work.”

10.4 Food and Shopping

Our survey findings provide evidence that vulnerable residents have been assisted by family, neighbours, volunteers, the council and community groups, to obtain food and shopping. Residents were especially appreciative of the service provided as part of the local COVID community response. Supermarket delivery slots are particularly valued, as those without may be putting themselves, or those they care for at risk when visiting shops.

Selected Comments

Positives

“Worried about food at the beginning.”

“Volunteers delivered shopping prior to us managing to get online deliveries.”

“Neighbours have helped with shopping.”

“Government food box delivery and that they got me a priority slot at Tesco was the best help.”

“Hospital charity offered food and occasionally small basics.”

Negatives

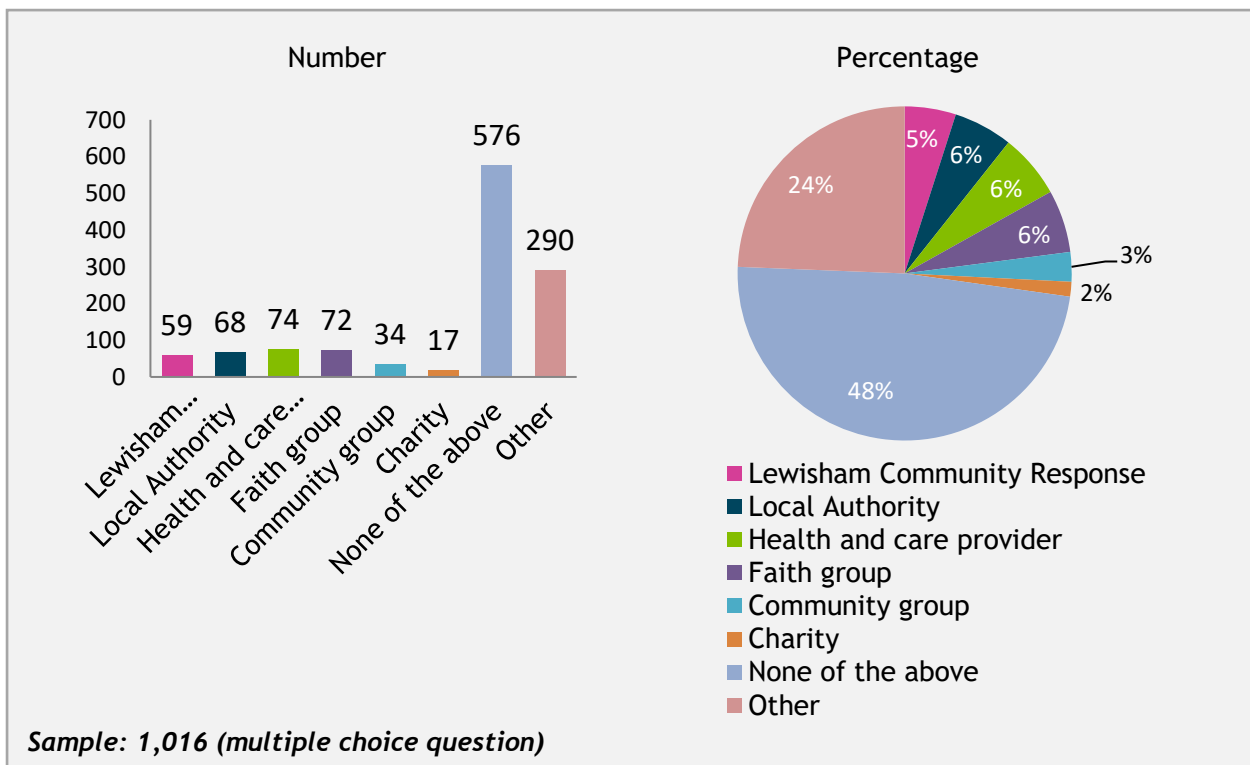
“Most stressful was sourcing suitable food for medical dietary requirements.”

“Not having access to online shopping deliveries was a worry during the height of the pandemic as I had to go to the supermarket which meant I felt I was putting my husband at risk as he has diabetes so that was the biggest worry from a health perspective.”

10.5 Community Support

We asked residents who they felt ‘offered the greatest help’ during lockdown, listing a range of different groups and services.

10.5.1 Who offered you the greatest help during the lockdown?



When reviewing feedback, we find that friends, family and neighbours have been the largest single form of support during COVID-19. It was also evident that online groups, through WhatsApp and Facebook have helped local communities to support each other, while some people - living in 'friendly neighbourhoods' feel reassured generally. Some people cite a lack of support.

Community services and groups which were considered supportive includes Carers Lewisham, Lewisham MIND, Healthwatch Lewisham, Rushey Green Time Bank, Mindful Mums and Lewisham Homes.

Selected Comments

Positives

"The community support (via Facebook groups set up by neighbours) has been fantastic and is one of the positives to come out of a horrendous situation."

"Our local street WhatsApp group has kept in touch with the neighbours."

"My wife and I have supported each other, so we have not had to call for external help, but we do live in a friendly road and could get help if we needed it."

Negatives

"I haven't really had any support. I've only received one food parcel."

"The initial feeling of communities working together has ebbed."

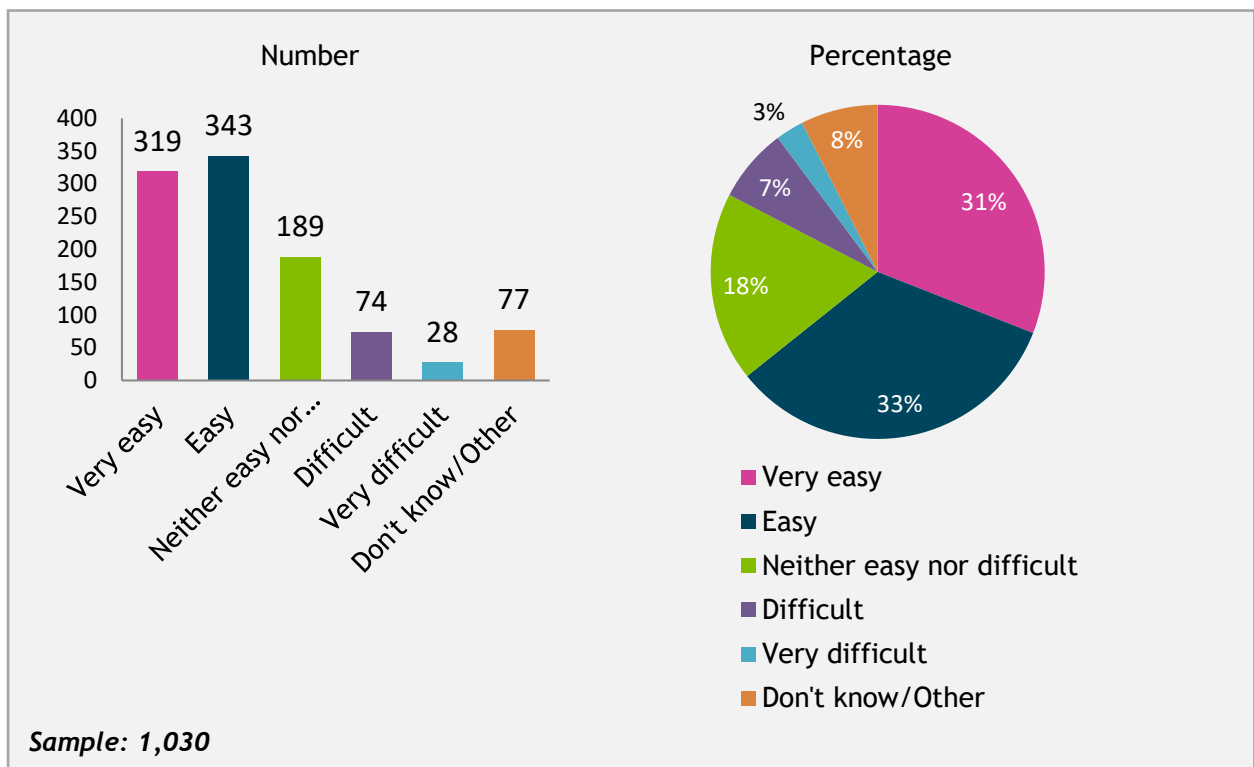
11. Communication and Information

This section examines various aspects of communication, looking at whether people felt they have the right information to keep them safe.

11.1 Knowing What to Do, During Covid-19

We asked people how easy they find it, to ‘know what to do’ to keep themselves and others safe, during the pandemic.

11.1.1 How easy have you found it to know what to do to keep yourself and others safe during the pandemic?



Just under two thirds of respondents (64%) find it to be ‘easy’ or ‘very easy’ with only 10% finding it more difficult.

One person aptly said ‘We are all trying to put together the different messages and priorities so we can make the right decisions’, and this underscores the volume and variety of information sources.

It is noted that it can take ‘time and effort’ to be adequately informed - advice from different sources may be contradictory, so people may choose to research and validate information. Those who found it difficult explained that they felt Government messaging was confusing and needed to be clearer.

Selected Comments

“Easy to get lots of information from different sources but it keeps changing and different sources give different information. We are all trying to put together the different messages and priorities so we can make the right decisions.”

“I spend a lot of time keeping up to date on this, but I can't imagine how anyone who doesn't go out of their way to stay updated could possibly know what the rules actually are at the moment.”

“I am unsure to be honest, I would like to think I am informed but I am not sure I trust the information being shared. “

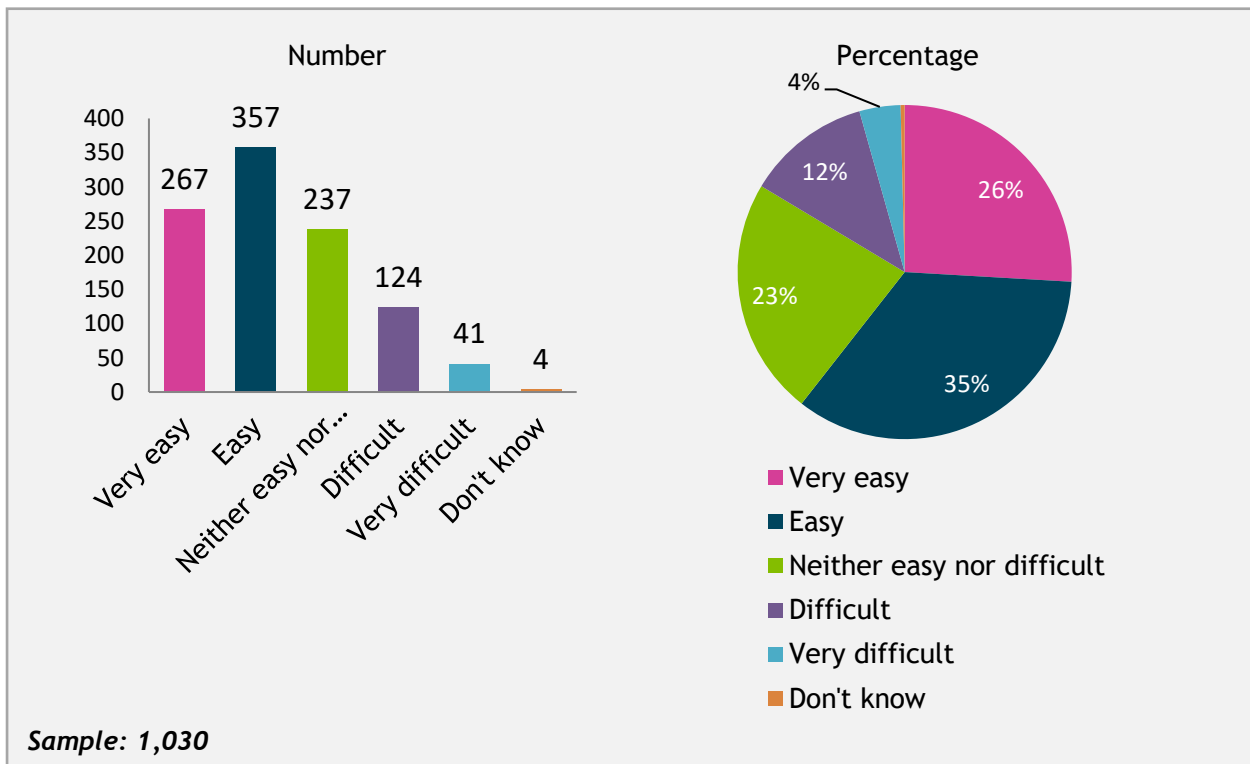
“More written information & advice on the latest state of scientific advice.”

“Easy because I will do my own research.”

11.2 Information - Keeping Updated

We also asked people how easy it was, to remain up to date as information, advice and guidance changed over time.

11.2.1 How easy have you found it to keep up to date with the changes to information about how to keep yourself and others safe during the pandemic?



Similarly, to the previous question, the majority of respondents (61%) find it to be 'easy' or 'very easy' with 16% finding it more difficult.

The data shows that people found it slightly harder to keep up to date with the changes to information, which reflects people's comments that the messaging at the beginning of the lockdown was clearer. Repeated and constant use of simple slogans, such as 'stay at home' or 'wash your hands' have clearly influenced behaviour. The more complex messaging, following easing of restrictions such as on employment, schooling or shopping can lead to confusion - with complaints about 'unclear and conflicting information' common.

Many feel that leading by example is important - with officials breaking the rules undermining trust.

Selected Comments

"Government advice straightforward (particularly at initial lockdown stage) but the easing of restrictions has been less clearly communicated. The advice is almost contradictory."

"At the moment still being careful (mask in shops/handwashing) but official advice is very confusing."

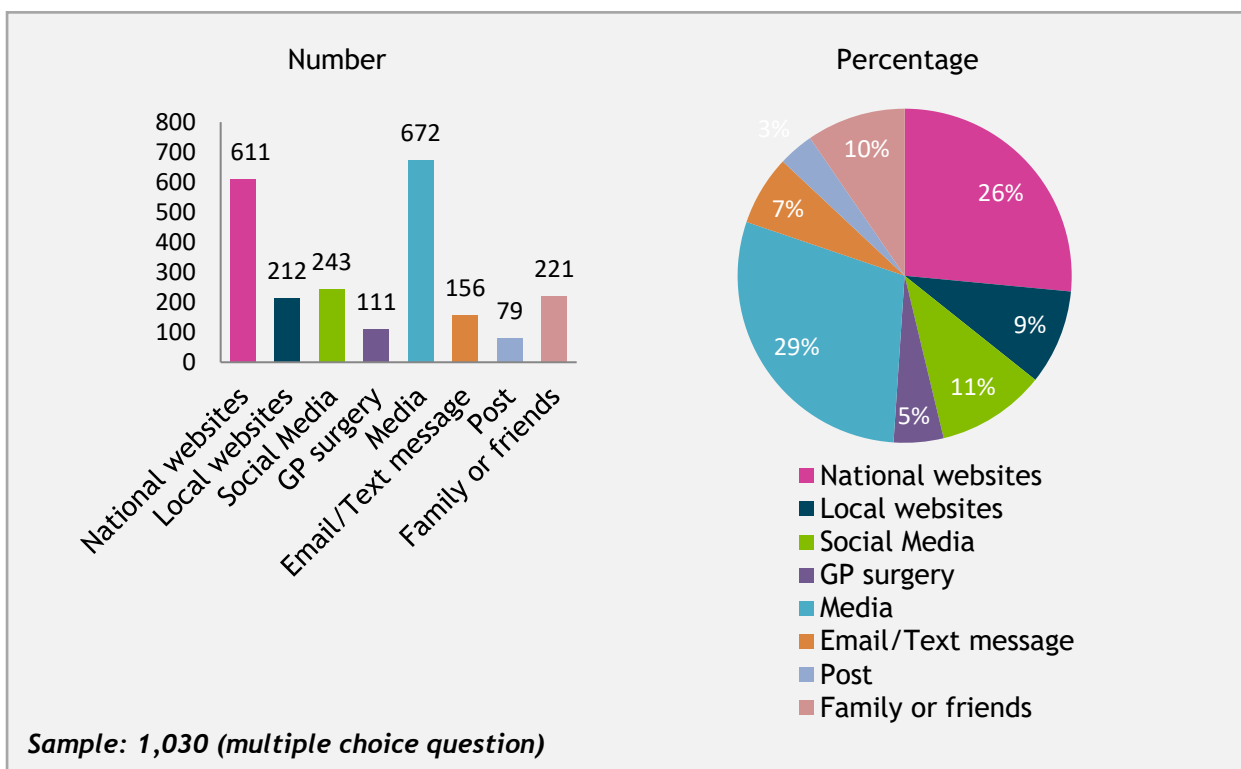
"Too many changes too awkwardly put."

"Initially straightforward advice which became very confusing after the Dominic Cummings debacle. We are all still very cross about that."

11.3 Helpful Information Sources

We asked people which sources of information they have found to be 'especially helpful' during the lockdown. A range of multiple-choice options included online sources (national, local and social media), the GP, media (television, radio and newspaper), email or text messaging, post and family or friends.

11.3.1 From these options, which information or sources of information have you found especially helpful?



The most popular medium for coronavirus information was the media, which received 29% of all selections. Respondents felt the best sources for information during the pandemic were the daily COVID-19 briefings, news and the NHS and Government websites. National information sources were preferred to local communication, with social media being considered a more helpful resource than local organisations’ websites. However, a small number of respondents praised the Lewisham council newsletter.

Despite its popularity, some people did complain that mass media is biased and opinionated, with some distrust at headlines and facts. An exception to this is the daily Government press briefings, viewed as more reliable generally due largely to their official nature. The BBC receives much praise - for both its television and website content.

We found that different people value different formats - some place particular value on information shared by their family and friends (10%) written whilst others (7%) are comforted by regular text messages and emails from services. Local services should explore further use of SMS messaging to inform patients.

Selected Comments

Positives

“The daily updates were helpful as it was coming direct from the government.”

“Daily briefings and the news were most helpful. There was always something on explaining the latest developments and what to do.”

“I think the daily Coronavirus updates were helpful on the BBC, I feel overall the government’s guidelines have been clear - I don’t understand why some people have said the information has not been clear.”

“Advice from the GP while suffering Covid made me feel safe without the need to leave my home.”

“Receiving information by post was helpful over the initial 12 weeks of shielding as it gave me an immediate reference point in case, I forgot something or needed clarification.”

“At the beginning of lockdown, I was getting regular texts from the NHS which made me feel that I was being looked out for.”

“I have seen posters in my local area about how to access support if you are self-isolating.”

“Lewisham Local send out twice weekly newsletters, helpful.”

“Local information from Lewisham has been good and fairly clear.”

Negatives

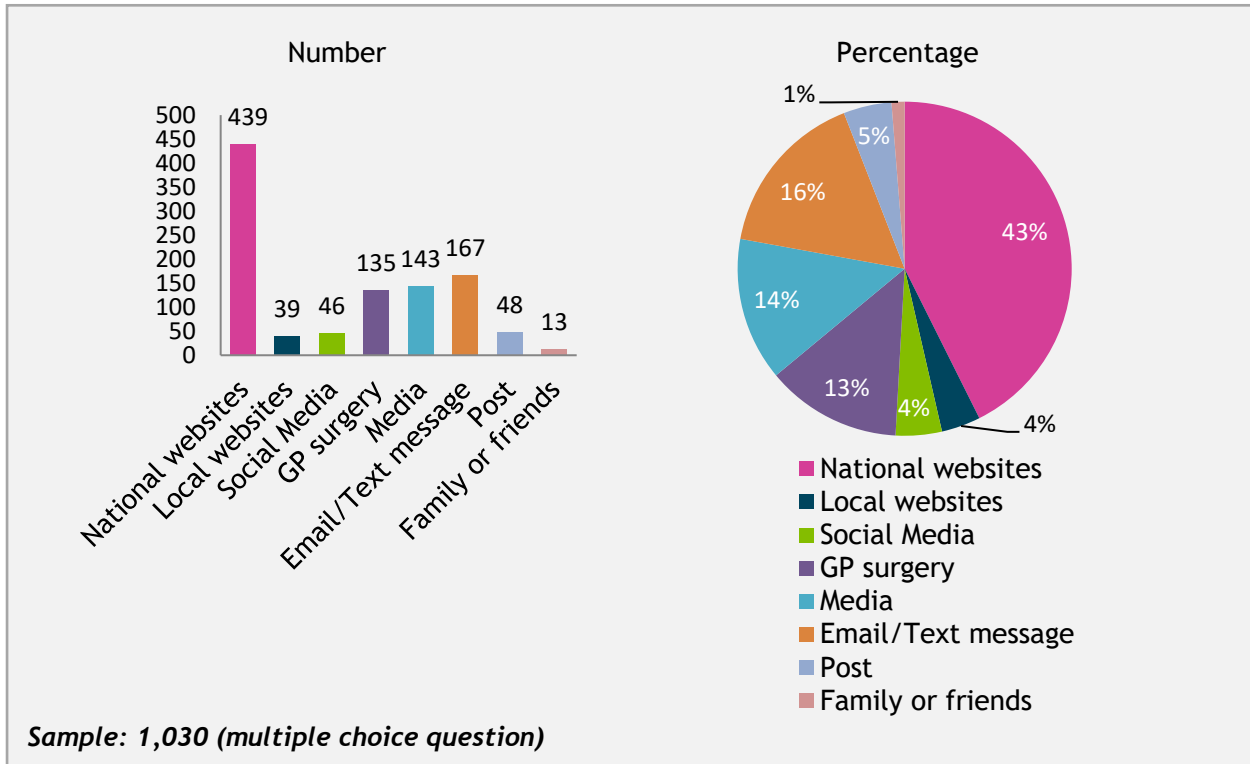
“Media unhelpful as flooded with opinion and bias.”

“Lewisham Council website unclear about statutory responsibilities, indirect about how to get support.”

11.4 Health and Care Information

We asked people to indicate their preferred method of accessing health and care information. National websites are by far the most popular, accounting for 43% of selections. However, this was not universal and 17% of respondents would prefer to receive important information via text or email.

11.4.1 What is your preferred way of receiving health/care information?



11.5 Topics that are 'Difficult' to Access

We asked people which topics, if any, they have found it difficult to get clear information on. Most respondents did not feel they needed any additional information. But for those who did, the 4 main topics were COVID-19 testing (22%), health service changes (19%) dental services (18%) and mental health self-help tips (17%)

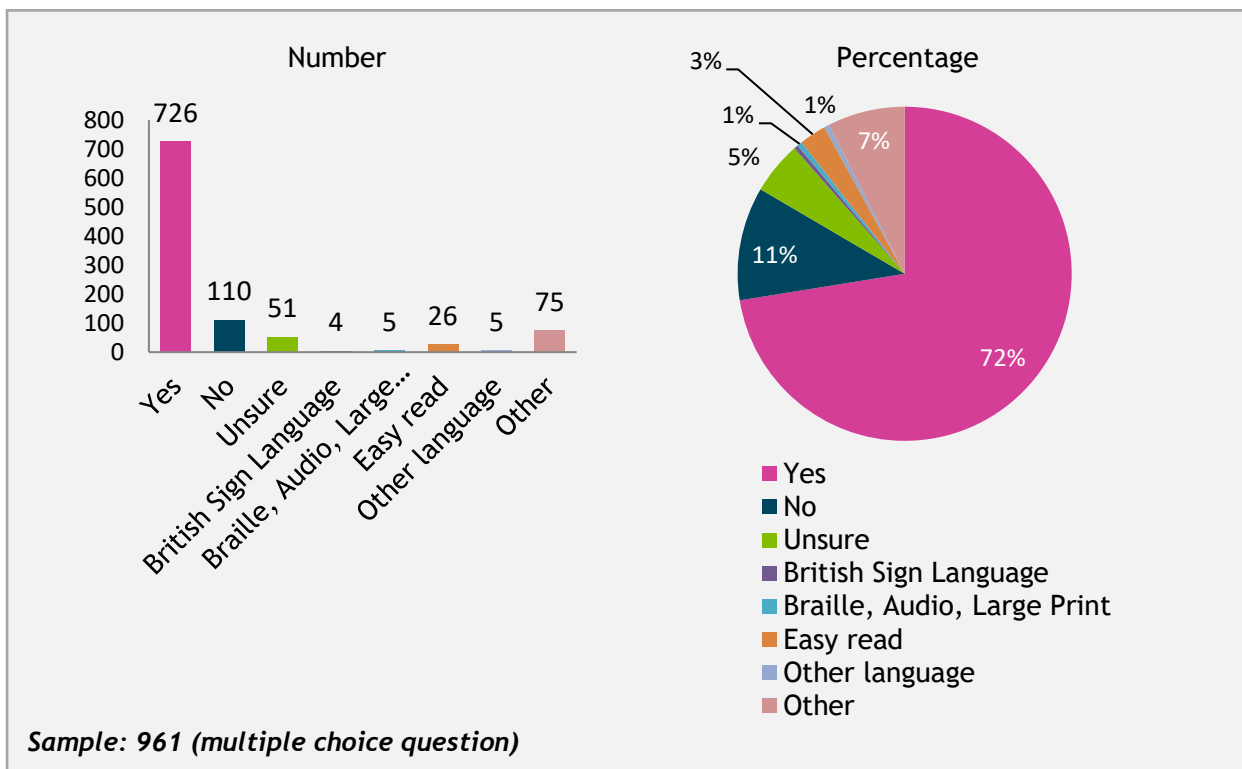
Patients would also value clear guidelines about when and if they should wear a mask/face covering and how to respond to people not following social distancing guidelines.

Our survey findings and additional engagement found that there was confusion around shielding eligibility. Numerous residents felt that they were at high risk of getting seriously ill from coronavirus should have received a shielding letter. People were not aware that they could raise this issue directly with their GP.

11.6 Information Formats

Respondents were also asked people if they have been able to find information and advice in formats or languages accessible to them.

11.6.1 Have you been able to find information and advice in the format(s) or language(s) needed to make it accessible to you?



While the vast majority of respondents (72%) said yes, a sizeable minority (11%) said no.

People from the deaf community are appreciative of BSL (British Sign Language) interpretation on press briefings and on charity websites/social media channels. However, it is said that there is generally insufficient provision of BSL and that the quality of, and access to information can be 'quite poor'. Those with learning disabilities cite a lack of easy read information.

Many residents explained that although there were accessible national resources about COVID-19 guidance, it was much harder to find local information which was translated or provided in other accessible formats.

12. Digital Technology

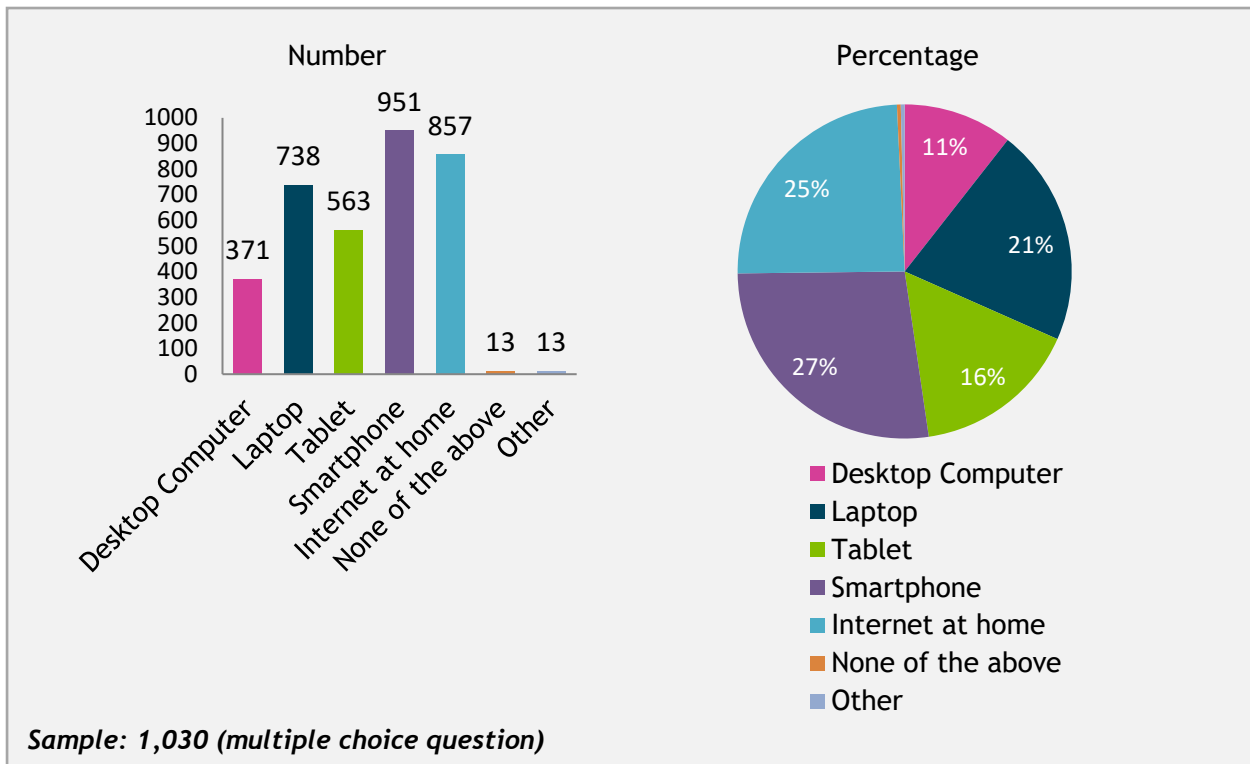
In this section, we look at access to digital equipment, confidence in accessing services online, and what might help in increasing use of digital services.

It should be recognised that 95% of respondents shared their experiences of COVID-19 through filling an online survey. An assumption can be drawn that most respondents felt comfortable in using digital technology. There is a need for further engagement with residents who are digitally excluded.

12.1 Access to Digital Equipment

We asked people which items of digital equipment they had access to at home, with multiple-choice options including desktop computer, laptop computer, tablet, smartphone and internet.

12.1.1 Do you have access to any of the following at home?

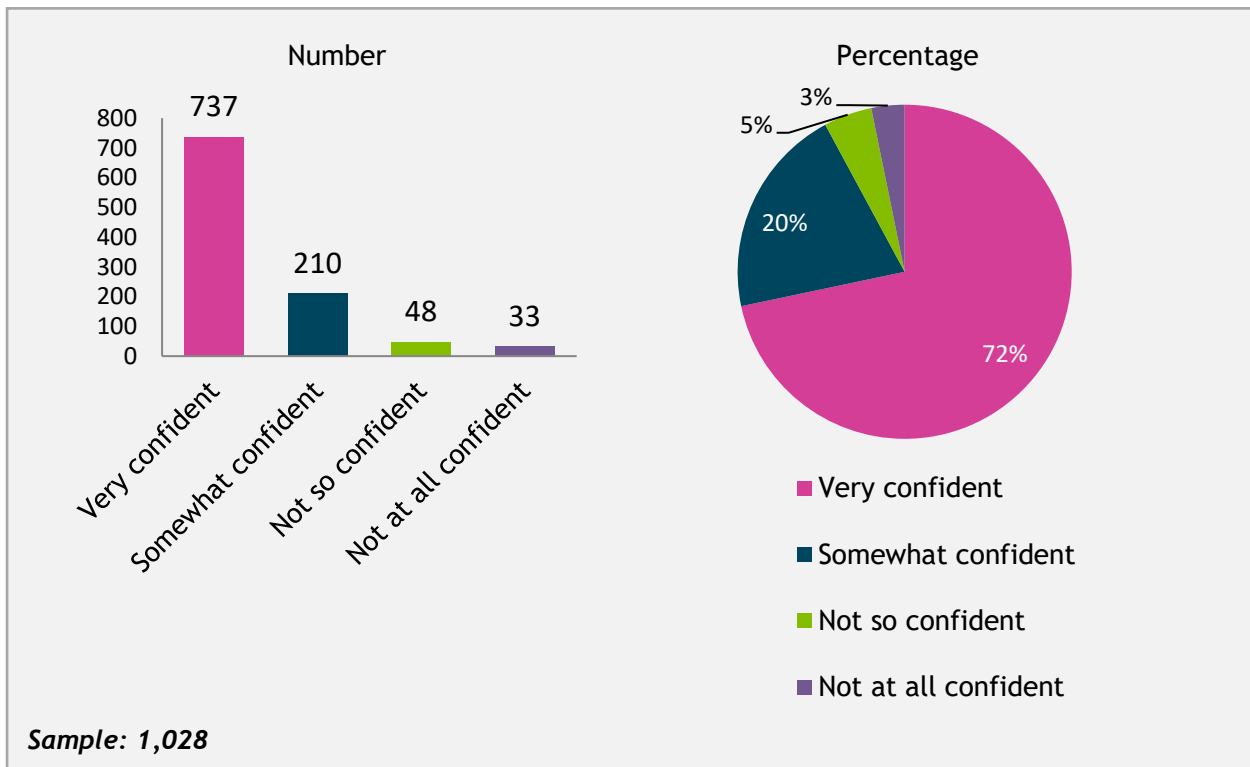


The majority of respondent have access to a smartphone (27% of selections), and broadband (25%). On computers, laptops are most popular (21%), with tablets also well utilised (16%) and desktops used less frequently (11%).

12.2 Confidence in Accessing Services Online

We asked people how confident they felt, to access services through a computer, tablet or smartphone. The vast majority of respondents (92%) feel ‘very or somewhat’ confident, with just 3% feeling ‘not at all’ confident.

12.2.1 How confident do you feel using a computer, tablet or smartphone to access healthcare?



12.3 What is Needed to Increase Confidence?

Respondents were asked what they felt was needed to increase confidence in using a computer, tablet or smartphone to access healthcare. Most residents felt that the provision of guidance and training were the main resources which would enable people to feel more comfortable using technology. Further knowledge is necessary to empower residents.

Other suggestions included the improvement of apps to make them more user friendly. We also detected themes on accessibility, confidentiality, equipment and cost. Comments related to these themes have been listed below:

Accessibility

- Availability of medical records
- More online appointments
- More user-friendly appointment services
- Assurances that face to face appointment will not be replaced by digital methods
- Clear uncomplicated information
- Websites need to be more user friendly and fully accessible to blind users
- Information needs to be regularly updated
- Availability of localised information
- Software sometimes is a let-down, bearing in mind it is for unwell people
- Simpler procedures

Confidentiality

- Secure direct access to clinicians
- Confidentiality and safety from misuse (cybercrimes etc)
- Acknowledgement that communication has been received/acted upon
- Password protection and overall security
- Confirmation that it is secure
- Privacy

Equipment and Cost

- Good signal from phone companies
- Available internet access
- Better internet connection
- Cheaper broadband
- Funding for laptops

Instruction and Training

- Some tuition
- To learn more about computers
- Just practice
- Online tutorials
- One-to-one education
- To know exactly what to do and who to really be in touch with.
- Information guides
- Learning how to use my smartphone properly.
- More practice, help from younger relatives.
- Guidance as to which sites can be trusted to get information.

12.4 Benefits and Limitations of Online Access

We asked people to consider the benefits and limitations of accessing healthcare using a computer, tablet or smartphone.

People consider online services to be quick, efficient, convenient and informative, with benefits for both services and service users. Crucially during the pandemic, online methods may also reduce the risk of infection.

Benefits

1. Easier access to health information at a time and location that suits the patient
2. Quicker access to care as patients do not need to visit the GP practice/healthcare services
3. Reduces the risk of spreading diseases because there is less contact between patients
4. Easier to access appointments for those who work full time
5. More convenient for patients with mobility issues if they do not require a physical examination or blood test

On the other hand, respondents felt digital consultations can reduce direct 'human' contact, are impersonal, not always reliable and excludes a large section of the population.

Limitations

1. The technology is not accessible for all, there is a risk of creating/widening health inequalities for those without or those who do not want to access healthcare digitally
2. Digital consultations are less personal
3. There is a wide range of online health sources available which can provide conflicting information
4. Lack of face to face contact, respondents believe there is a need for physical examination for certain conditions (e.g. Long-Term Conditions)
5. Quality of appointments can be impacted by broadband and bandwidth issues
6. There is a higher change of missed diagnosis through online consultations. Doctors are less likely to pick up body language or understand if patients are downplaying their symptoms

Respondents felt that accessing healthcare through digital technology can create quicker and easier access to health information and routine appointments. However, patients still value face to face contact and the need for physical examinations. It was felt that the main limitation of using a tablet, computer or smartphone is the digital exclusion for those who cannot use or afford to use the technology.

13. Recommendations

Based on the analysis of feedback, we make the following recommendations on health and care services, mental health, and wider community services.

Health and Care Services: 7 Recommendations

1. A significant percentage of respondents (20%) were unaware that their GP practices were offering routine appointments or did not want to access services/ delayed treatment in fear of catching the disease or being a burden on the NHS.

Recommendation 1: Patients want written confirmation that services are safe and have adequate capacity. There is a need for a local communication campaign across the borough (and potentially the SEL region) which covers the current primary care offer in view of the different access arrangements and informs patients about what services are available. GP practices should also explore communicating via SMS message to inform patients of any changes to services.

Recommendation 2: All local health and care services need to reassure residents that their services are carrying out social distancing and infection prevention measures. General positive messaging on a national, regional, and local level will help to restore confidence and uptake.

2. Respondents felt that although using digital technology can create quicker and easier access to healthcare, it also excludes those who cannot use or afford to use the technology.

Recommendation 1: While it is acknowledged that digital services are effective and resourceful, we feel there should always be an alternative. It is recognised that a 'one size fits all' system will result in the marginalisation of disadvantaged and vulnerable groups. Services need to ensure that there is still equity of access for residents who cannot engage with the digital offer.

Recommendation 2: Although a small sample size, patients with sensory disabilities have experienced difficulties when trying to access healthcare digitally with issues around translators and apps. Services need to offer flexibility and choice when it comes to appointments and ensure that all protocols meet the Accessible Information Standard by offering alternative methods of contact for those who need additional support.

Recommendation 3: Residents told us that they were more likely to use digital technology to access healthcare if there was the provision of training resources and guidance. A digital training programme should be rolled out across Lewisham to support those who are willing to learn but currently do not feel comfortable enough or fully understand how to use the technology.

From hearing the experiences of residents, it is evident that the issue of digital exclusion must be considered a local priority. A wider piece of work could be commissioned around digital exclusion that covers all digital services in the borough.

3. Some respondents received limited communication about cancelled medical appointments.

Recommendation: Feedback suggests that a lack of communication on cancelled appointment can be a major cause of anxiety, and a key contributor to worsening physical and mental health. We would urge hospital services to get in touch with all patients in this situation, as soon as possible, with clear (and unambiguous) information and support offered.

4. When asking people about ‘risks’ associated with accessing health services, the most common response was infection risk while travelling to-and-from appointments, especially if public transport is involved.

Recommendation: The provision of “COVID secure” patient transport would help to reduce the concerns of those most at risk and encourage shielding patients to access services.

Mental Health and Wellbeing: 3 Recommendations

5. The COVID-19 outbreak and lockdown has had a substantial emotional impact on residents, including carers.

Recommendation: Wide provision of mental health support services must be included in services’ recovery plans to help those with existing conditions but also for those who have never previously sought support.

6. It is found that those with existing mental health conditions will be much more impacted and at greater risk during the pandemic. Those in need of help do not necessarily seek it.

Recommendation: We would urge services, GPs in particular, to identify those with a known mental health condition and check on welfare.

7. Those with activities, hobbies or routines appear to be more resilient than those without.

Recommendation: If possible, the level of social prescribing should be increased and enhanced, to reach more residents and reduce isolation. While this may have a cost implication, the subsequent reduction in physical and mental health conditions may in fact benefit services in the longer to medium term. Services should also explore how the local infrastructure and resources within the voluntary sector could be utilised.

Wider Community: 4 Recommendations

8. The lockdown and shielding guidelines have led to increased levels of social isolation within the borough.

Recommendation: There is no single organisation with ultimate responsibility for tackling the issue of social isolation, therefore it is crucial that agencies co-produce and work together to find solutions. Socially isolated residents tend to be hard to reach, nevertheless it should be possible to offer regular phone calls or a 'friendly knock on the door.'

9. Respondents felt that they needed more information about shielding during the pandemic, especially those who did not receive a letter but considered themselves vulnerable.

Recommendation: Information needs to be developed locally which outlines the options available for people who did not receive a shielding letter but feel that they should self-isolate.

10. Anxiety about contracting the virus is widespread, with 59% of respondents 'concerned' about passing it on to others. Those who use public transport, work on the frontline, are shielding or have regular interaction with those shielding, have particular and justified concerns.

Recommendation: We need to make the working and wider environment as 'Covid Secure' as possible. While this is difficult, and indeed challenging to implement and police, we recommend some level of visible, ongoing enforcement and review - not least to reassure the public. There needs to be clear communication about the measures which have been implemented to enable public reassurance.

11. A sizeable minority of respondents (11%) say that information is not accessible to them.

Recommendation: Information intended for the public consumption should observe accessibility protocols on formatting and presentation. Any information considered to be especially important should also be offered in a range of accessible formats, including translation into community languages materials. Local partners must work together to ensure there is a consistency of information across the borough.

BAME Communities: Wholesale Recommendation

12. Our findings show that BAME respondents felt they were more likely to be disadvantaged because of COVID-19.

Recommendation: Further investigation and review will allow services to better understand and address issues and themes. Healthwatch Lewisham is keen to continue its role as a core partner and stakeholder, in any such undertaking.

14. Glossary of Terms

ADHD	Attention Deficit Hyperactivity Disorder
BAME	Black, Asian & Minority Ethnic
BSL	British Sign Language
MS	Multiple Sclerosis
PPE	Personal Protective Equipment

15. Distribution and Comment

This report is available to the public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

Healthwatch Lewisham, Waldram Place, Forest Hill, London, SE23 2LB

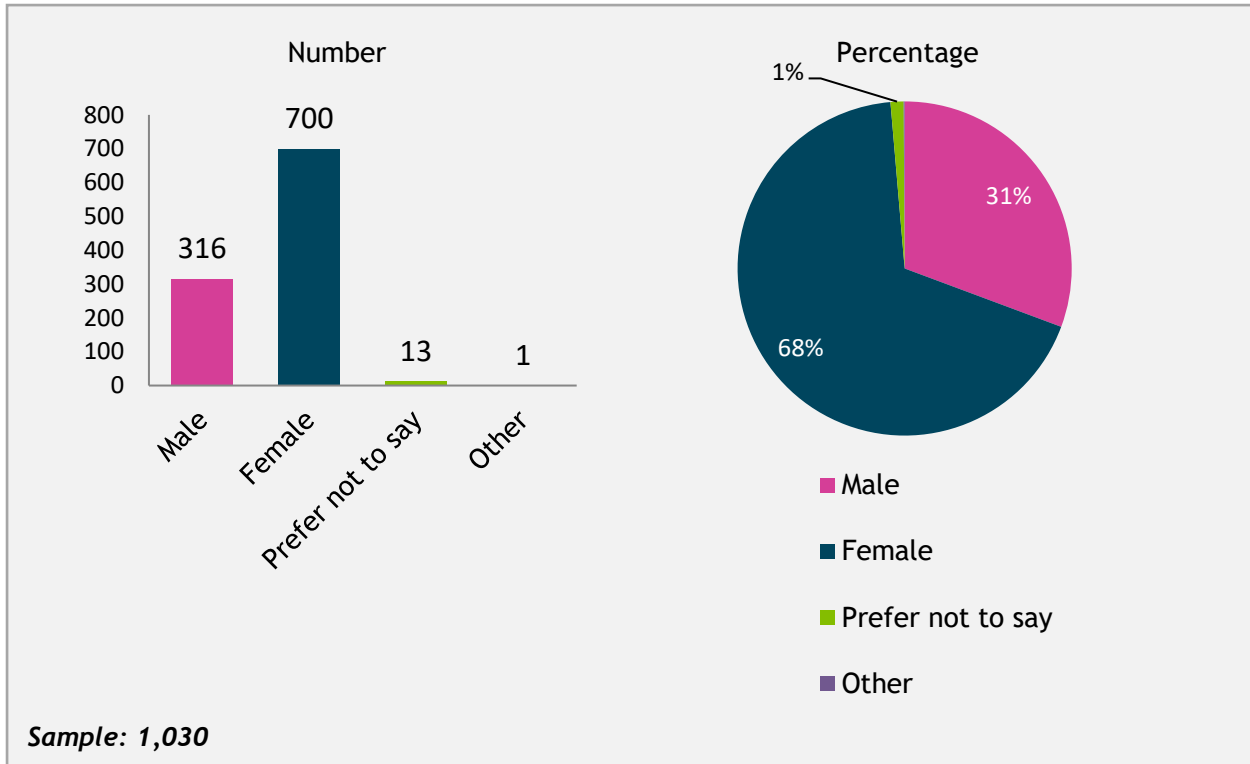
Telephone: 020 3886 0196

Email: info@healthwatchlewisham.co.uk

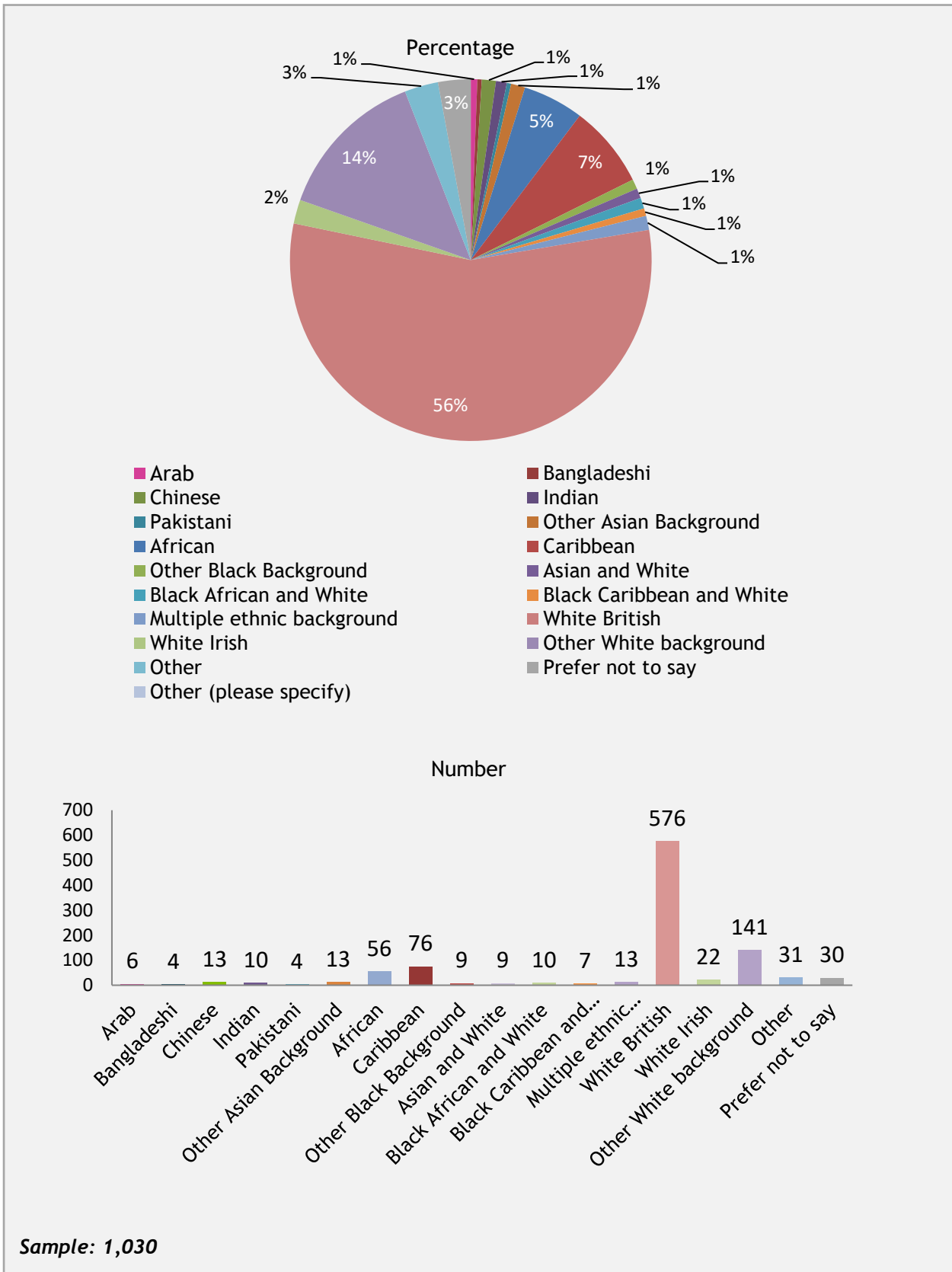
Annex - Demographics

The stated demographics of participants are as follows.

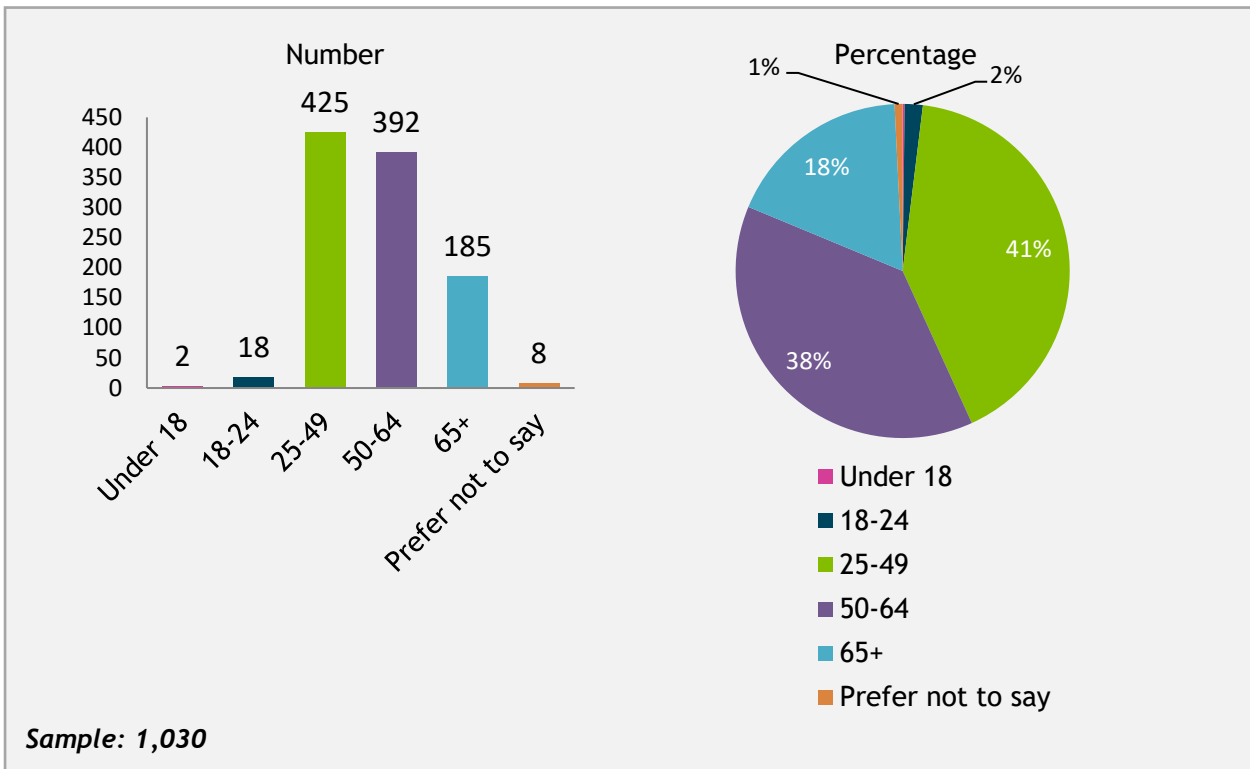
How would you describe your gender?



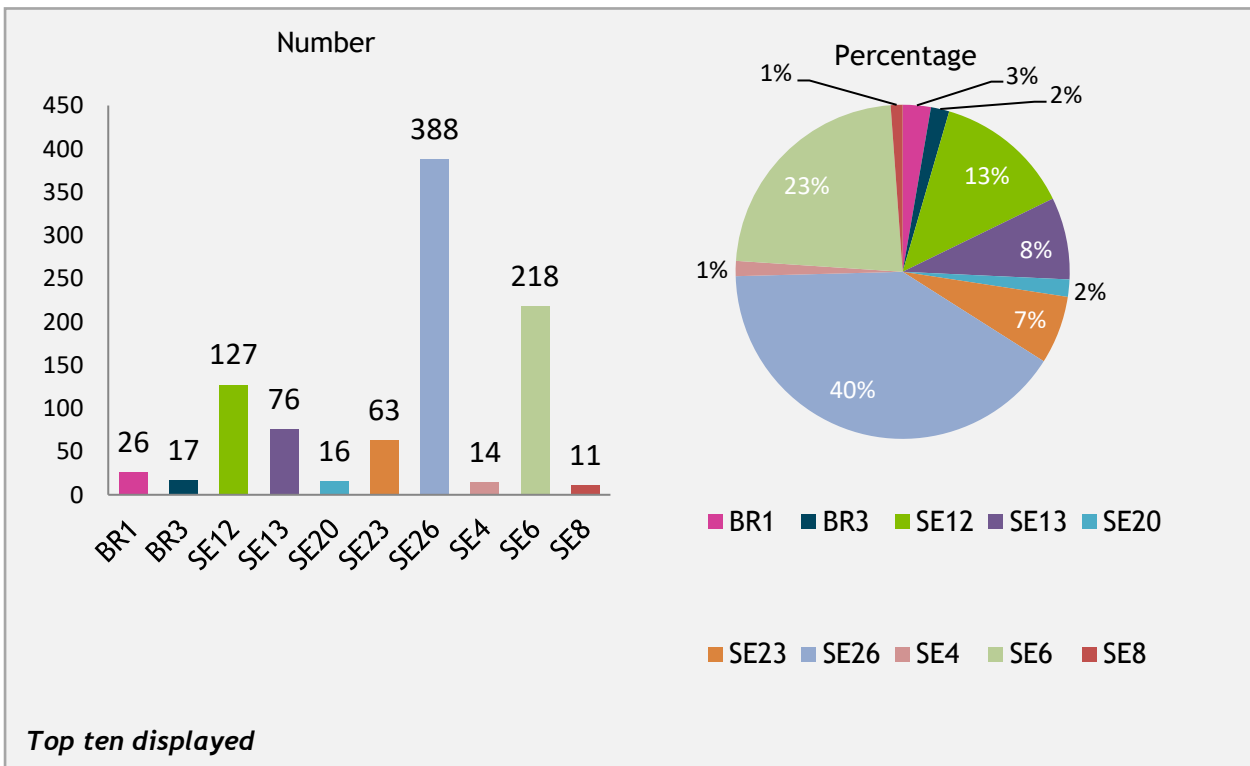
Please select your ethnic background:



How old are you?



Post Code Areas



“My mental health is improved as there is far less stress in my life and so much more time, instead, with my partner.”

Local resident